

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF TEXAS

Case number (if known) _____ Chapter 7☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/19

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	<u>High Mesa, Inc.</u>	
<hr/>		
2. All other names debtor used in the last 8 years <small>Include any assumed names, trade names and doing business as names</small>		
<hr/>		
3. Debtor's federal Employer Identification Number (EIN)	<u>20-5356995</u>	
<hr/>		
4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	<u>16600 Park Row, Suite 158</u> <u>Houston, TX 77084</u> <small>Number, Street, City, State & ZIP Code</small>	<hr/>
	<u>Harris</u> <small>County</small>	Location of principal assets, if different from principal place of business <hr/>
		<small>Number, Street, City, State & ZIP Code</small> <hr/>
<hr/>		
5. Debtor's website (URL)	<hr/>	
<hr/>		
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____	
<hr/>		

Debtor **High Mesa, Inc.**
Name

Case number (if known)

7. Describe debtor's business A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

2111**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

Check one:

- ☒ Chapter 7
- ☐ Chapter 9
- ☐ Chapter 11. Check all that apply:
- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625 (amount subject to adjustment on 4/01/22 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.
- ☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?☒ No.☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?☐ No☒ Yes.

List all cases. If more than 1, attach a separate list

Debtor	SEE ATTACHED SCHEDULE 1	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor **High Mesa, Inc.**
Name

Case number (if known)

11. Why is the case filed in this district?*Check all that apply:*

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention?** (*Check all that apply.*)☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other _____**Where is the property?** _____

Number, Street, City, State & ZIP Code

Is the property insured?☐ No☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information**13. Debtor's estimation of available funds***Check one:*☐ Funds will be available for distribution to unsecured creditors.☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.**14. Estimated number of creditors**☐ 1-49☐ 50-99☐ 100-199☐ 200-999☒ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated Assets**☒ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☒ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **High Mesa, Inc.**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **January 24, 2020**
MM / DD / YYYY**X /s/ Scott Ricks**
Signature of authorized representative of debtor

Title **Authorized Representative****Scott Ricks**
Printed name**18. Signature of attorney****X /s/ RANDY W. WILLIAMS**
Signature of attorney for debtorDate **January 24, 2020**
MM / DD / YYYY**RANDY W. WILLIAMS**
Printed name**Byman & Associates PLLC**
Firm name**7924 Broadway, Suite 104**
Pearland, TX 77581
Number, Street, City, State & ZIP CodeContact phone **281-884-9262** Email address **rww@bymanlaw.com****21566850 TX**
Bar number and State

PETITION - SCHEDULE 1**Pending Bankruptcy Cases Filed by the Debtors and Affiliates of the Debtors**

Each of the affiliated entities listed below, including the debtor in this chapter 7 case (collectively, the "Debtors"), filed a petition with this Court for relief under chapter 7 of the Bankruptcy Code.

Debtor Name	Date File	District
Alta Mesa Acquisition Sub, LLC	1/24/2020	Southern District of Texas, Houston Division
Alta Mesa Drilling, LLC	1/24/2020	Southern District of Texas, Houston Division
Alta Mesa Energy, LLC	1/24/2020	Southern District of Texas, Houston Division
Alta Mesa GP, LLC	1/24/2020	Southern District of Texas, Houston Division
AM Idaho, LLC	1/24/2020	Southern District of Texas, Houston Division
AM Michigan, LLC	1/24/2020	Southern District of Texas, Houston Division
AMH Energy New Mexico, LLC	1/24/2020	Southern District of Texas, Houston Division
Aransas Resources, LP	1/24/2020	Southern District of Texas, Houston Division
ARI Development, LLC	1/24/2020	Southern District of Texas, Houston Division
Brayton Management GP II, LLC	1/24/2020	Southern District of Texas, Houston Division
Brayton Resources II, LP	1/24/2020	Southern District of Texas, Houston Division
Brayton Resources, LP	1/24/2020	Southern District of Texas, Houston Division
Buckeye Production Company, LP	1/24/2020	Southern District of Texas, Houston Division
Cairn Energy USA, LLC	1/24/2020	Southern District of Texas, Houston Division
FBB Anadarko, LLC	1/24/2020	Southern District of Texas, Houston Division
Galveston Bay Resources, LP	1/24/2020	Southern District of Texas, Houston Division

High Mesa Holdings GP, LLC	1/24/2020	Southern District of Texas, Houston Division
High Mesa Holdings, L.P.	1/24/2020	Southern District of Texas, Houston Division
High Mesa Services, LLC	1/24/2020	Southern District of Texas, Houston Division
High Mesa, Inc.	1/24/2020	Southern District of Texas, Houston Division
HMS Kingfisher Holdco, LLC	1/24/2020	Southern District of Texas, Houston Division
LEADS Resources, LLC	1/24/2020	Southern District of Texas, Houston Division
Louisiana Exploration & Acquisition LP	1/24/2020	Southern District of Texas, Houston Division
Louisiana Onshore Properties, LLC	1/24/2020	Southern District of Texas, Houston Division
Navasota Resources Ltd. LLP	1/24/2020	Southern District of Texas, Houston Division
Nueces Resources, LP	1/24/2020	Southern District of Texas, Houston Division
Petro Acquisitions, LP	1/24/2020	Southern District of Texas, Houston Division
Petro Operating Company, LP	1/24/2020	Southern District of Texas, Houston Division
Sundance Acquisition, LLC	1/24/2020	Southern District of Texas, Houston Division
TEA Energy Services	1/24/2020	Southern District of Texas, Houston Division
Texas Energy Acquisitions, LP	1/24/2020	Southern District of Texas, Houston Division
The Meridian Production, LLC	1/24/2020	Southern District of Texas, Houston Division
The Meridian Resource and Explorations, LLC	1/24/2020	Southern District of Texas, Houston Division
The Meridian Resource, LLC	1/24/2020	Southern District of Texas, Houston Division
Virginia Oil and Gas, LLC	1/24/2020	Southern District of Texas, Houston Division

On September 11, 2019, each of the affiliated entities listed below (collectively, the “**Initial Debtors**”) filed a voluntary petition for relief under chapter 11 of title 11 of the United States Code (the “**Bankruptcy Code**”) in the United States Bankruptcy Court for the Southern District of Texas. The chapter 11 cases of the Initial Debtors are being jointly administered at Case Number 19-35133 (MI).

DEBTOR	CASE NUMBER	RELATIONSHIP
Alta Mesa Resources, Inc.	19-35133	Ultimate Parent
Alta Mesa Holdings, LP	19-35134	Affiliate
Alta Mesa Holdings GP, LLC	19-35135	Affiliate
OEM GP, LLC	19-35136	Affiliate
Alta Mesa Finance Services Corp.	19-35137	Affiliate
Alta Mesa Services, LP	19-35138	Affiliate
Oklahoma Energy Acquisitions, LP	19-35139	Affiliate

On January 12, 2020, each of the affiliated entities listed below (collectively, the “**KFM Debtors**”) filed a voluntary petition for relief under chapter 11 of the Bankruptcy Code in the United States Bankruptcy Court for the Southern District of Texas. These chapter 11 cases and the Initial Debtors’ cases are being jointly administered at Case Number 19-35133 (MI).

COMPANY
Kingfisher Midstream, LLC
Kingfisher STACK Oil Pipeline, LLC
Oklahoma Produced Water Solutions, LLC
Cimarron Express Pipeline, LLC

In addition, January 20, 2020, SR II Opco GP, LLC and SR II Opco, LP, affiliates of the Initial Debtors and the KFM Debtors, each filed a voluntary petition for relief under chapter 11 of the Bankruptcy Code in the United States Bankruptcy Court for the Southern District of Texas. These chapter 11 cases, KFM Debtors and the Initial Debtors’ cases are being jointly administered at Case Number 19-35133 (MI).

Fill in this information to identify the case:Debtor name High Mesa, Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 202****Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 24, 2020**X /s/ Scott Ricks**

Signature of individual signing on behalf of debtor

Scott Ricks

Printed name

Authorized Representative

Position or relationship to debtor

**GLOBAL NOTES AND STATEMENTS OF LIMITATION, METHODOLOGY, AND
DISCLAIMERS REGARDING THE DEBTORS' SCHEDULES OF ASSETS AND
LIABILITIES AND STATEMENTS OF FINANCIAL AFFAIRS**

High Mesa Holdings, LP (“**HMH**”) and its affiliated debtors and debtors in possession (collectively, the “**Debtors**”)¹ filed for chapter 7 (the “**Chapter 7 Cases**”) and in connection therewith have filed their respective Schedules of Assets and Liabilities (collectively, the “**Schedules**”) and the Statements of Financial Affairs (collectively, the “**Statements**” and, together with the Schedules, the “**Schedules and Statements**”) in the United States Bankruptcy Court for the Southern District of Texas (the “**Bankruptcy Court**”). The Debtors, with the assistance of their legal and financial advisors, prepared the Schedules and Statements, pursuant to section 521 of Chapter of Title 11 of the United States Code (the “**Bankruptcy Code**”) and Rule 1007 of the Federal Rules of Bankruptcy Procedure (the “**Bankruptcy Rules**”), and are unaudited.

In fact, there was limited data available to the Debtors, their management and professionals to prepare the Schedules and Statements. First, as a result of transactions between the Debtors and various Alta Mesa Resources, Inc. (“**Alta Mesa**”) entities that are currently in chapter 11, the Debtors do not have the underlying data prior to January 1, 2019 for their assets or the financial transactions related thereto. The Debtors were furnished with summary information and trial balances and used that information beginning January 1, 2019 to create books for the Debtors.

In addition, the Debtors retained the services of Opportune LLC (“**Opportune**”) to provide the accounting and financial functions of the Debtors beginning January 1, 2019, and the underlying data from January 1, 2019 to date is held and in the possession of Opportune. When Opportune was asked to provide the Debtors professionals with access to its own data, they were denied unless and until past obligations of the Debtor from 2018 were satisfied. The Debtors’ professionals were able to download some of the Opportune maintained data through a connection that was ultimately terminated by Opportune when the download was discovered. Because of liquidity issues and pending litigation, the Debtors had to move forward with the chapter 7 filings with the data and information available.

¹ The Debtors in these Chapter 7 cases are as follows: ALTA MESA ACQUISITION SUB LLC, ALTA MESA DRILLING LLC, ALTA MESA ENERGY LLC, ALTA MESA GP LLC, AM IDAHO LLC, AM MICHIGAN LLC, AMH ENERGY NEW MEXICO LLC, ARANSAS RESOURCES LP, ARI DEVELOPMENT LLC, BRAYTON MANAGEMENT GP II LLC, BRAYTON RESOURCES II LP, BRAYTON RESOURCES LP, BUCKEYE PRODUCTION COMPANY LP, CAIRN ENERGY USA LLC, FBB ANADARKO LLC, GALVESTON BAY RESOURCES LP, HIGH MESA HOLDINGS GP LLC, HIGH MESA HOLDINGS LP, HIGH MESA INC, HIGH MESA SERVICES LLC, HMS KINGFISHER HOLDCO LLC, LEADS RESOURCES LLC, LOUISIANA EXPLORATION & ACQUISITION LP, LOUISIANA EXPLORATION AND ACQUISITIONS PARTNERSHIP LLC, LOUISIANA ONSHORE PROPERTIES LLC, NAVASOTA RESOURCES LTD LLP, NEW EXPLORATION TECHNOLOGIES COMPANY LLC, NUECES RESOURCES LP, PETRO ACQUISITIONS LP, PETRO OPERATING COMPANY LP, SUNDANCE ACQUISITION LLC, TE TMR LLC, TEA ENERGY SERVICES LLC, TEXAS ENERGY ACQUISITIONS LP, THE MERIDIAN PRODUCTION LLC, THE MERIDIAN RESOURCE AND EXPLORATIONS LLC, THE MERIDIAN RESOURCE LLC, TMR DRILLING LLC, TMR EQUIPMENT LLC, VIRGINIA OIL AND GAS LLC. The location of the Debtors’ corporate headquarters and service address is 16600 Park Row, Suite 158, Houston, TX.

While the Debtors' management has made every reasonable effort to ensure that the Schedules and Statements are as accurate and complete as possible, based on the data and information that was available at the time of preparation, subsequent information or discovery could provide more information about the items identified in the Schedules and Statements, and inadvertent errors or omissions may have occurred. As the Schedules and Statements contain unaudited information, which is subject to further review, verification, and potential adjustment, as well as the fact that underlying historical data has not been provided by Alta Mesa and/or Opportune, these Schedules and Statements are as complete as practicable.

These *Global Notes and Statement of Limitations, Methodology, and Disclaimers Regarding the Debtors' Schedules and Statements of Financial Affairs* (the "**Global Notes**") are incorporated by reference in, and comprise an integral part of, each Debtor's respective Schedules and Statements, and should be referred to and considered in connection with any review of the Schedules and Statements.

The Schedules and Statements for the Debtors are signed by Scott Ricks, Authorized Representative of the Debtors. In reviewing and signing the Schedules and Statements, Mr. Ricks necessarily relied upon the efforts, statements, advice, and representations of personnel of the Debtors and the Debtors' legal and financial advisors. Mr. Ricks has not and could not personally verify the accuracy of each statement and/or representation contained in the Schedules and Statements, including, but not limited to, statements and representations concerning amounts owed to creditors, classification of such amounts, and creditors' addresses. The Debtors' accounting, finance and land management systems, such as they existed given the Debtors relationship with Alta Mesa and Opportune, were used to manage and track oil and gas production with a secondary focus on the creation of consolidated and consolidating financial statements. As such, certain assets, liabilities, or cash payments may have been reported on one legal entity in these Schedules and Statements, while the beneficiary of the transaction may have been another Debtor.

In preparing the Schedules and Statements, the Debtors relied on financial data derived from their books and records that was available at the time of such preparation. The Debtors, and their agents, attorneys, and financial advisors do not guarantee or warrant the accuracy or completeness of the data that is provided herein, and shall not be liable for any loss or injury arising out of or caused in whole or in part by the acts, errors, or omissions, whether negligent or otherwise, in procuring, compiling, collecting, interpreting, reporting, communicating, or delivering the information contained herein. While commercially reasonable efforts have been made to provide accurate and complete information herein, inadvertent errors or omissions may exist. For the avoidance of doubt, the Debtors and their professionals expressly do not undertake any obligation to update, modify, revise, or re-categorize the information provided herein, or to notify any third party should the information be updated, modified, revised, or re-categorized, except as required by applicable law. In no event shall the Debtors, or their agents, attorneys, and financial advisors, be liable to any third party for any direct, indirect, incidental, consequential, or special damages (including, but not limited to, damages arising from the disallowance of a potential claim against the Debtors or damages to business reputation, lost business, or lost profits), whether foreseeable or not and however caused, even if the Debtors or their agents, attorneys, or financial advisors are advised of the possibility of such damages.

Global Notes and Overview of Methodology

1. **Description of Cases.** On January 24, 2020, (the “**Petition Date**”), each of the Debtors filed voluntary petitions for relief under chapter 7 of the Bankruptcy Code. The Debtors will be filing a *Motion for Joint Administration* directing joint administration of the chapter 7 cases. Notwithstanding the joint administration of the Debtors’ cases for procedural purposes, each Debtor filed its own Schedules and Statements. The information provided therein, except as otherwise noted, is reported as of the Petition Date of each respective Debtor, as appropriate.

2. **Reservations and Limitations.** Commercially reasonable efforts have been made to prepare and file complete and accurate Schedules and Statements; however, as noted above, inadvertent errors or omissions may exist. Nothing contained in the Schedules and Statements constitutes a waiver of any of the Debtors’ rights or an admission of any kind with respect to these chapter 7 cases, including, but not limited to, any rights or claims of the Debtors against any third party or issues involving substantive consolidation, equitable subordination, or defenses or causes of action arising under the provisions of chapter 5 of the Bankruptcy Code or any other relevant applicable bankruptcy or non-bankruptcy laws to recover assets or avoid transfers. Any specific reservation of rights contained elsewhere in the Global Notes does not limit in any respect the general reservation of rights contained in this paragraph.
 - (a) **No Admission.** Nothing contained in the Schedules and Statements is intended or should be construed as an admission or stipulation of the validity of any claim against the Debtors, any assertion made therein or herein, or a waiver of the right to dispute any claim or assert any cause of action or defense against any party.
 - (b) **Recharacterization.** Notwithstanding that the Debtors have made commercially reasonable efforts to correctly characterize, classify, categorize, or designate certain claims, assets, executory contracts, unexpired leases, and other items reported in the Schedules and Statements, the Debtors nonetheless may have improperly characterized, classified, categorized, or designated certain items.
 - (c) **Categories or Labels for Purpose of Presentation in Schedules and Statements.** Information requested by the Schedules and Statements requires the Debtors to make a judgment regarding the appropriate category in which information should be presented or how certain parties, claims or other data should be labeled. The Debtors’ decisions regarding the category or label to use is based on the best information available as of the filing of these Schedules and Statements and within the time constraints imposed.
 - (d) **Classifications.** Listing (i) a claim on Schedule D as “secured,” (ii) a claim on Schedule E/F as “priority” or “unsecured,” or (iii) a contract on Schedule G as “executory” or “unexpired” does not constitute an admission by the Debtors of the legal rights of the claimant or contract counterparty, or a waiver of the right to

recharacterize or reclassify such claim or contract.

Claims Description. Any failure to designate a claim on the Debtors' Schedules and Statements as "disputed," "contingent," or "unliquidated" does not constitute an admission by the Debtors that such amount is not "disputed," "contingent," or "unliquidated."

- (e) **Estimates and Assumptions.** The preparation of the Schedules and Statements required the Debtors to make reasonable estimates and assumptions with respect to the reported amounts of assets and liabilities, the amount of contingent assets and contingent liabilities on the date of the Schedules and Statements, and the reported amounts of revenues and expenses during the applicable reporting periods. Actual results could differ from such estimates.
- (f) **Causes of Action.** Despite commercially reasonable efforts, the Debtors may not have identified all current and potential causes of action the Debtors may have against third parties in their respective Schedules and Statements, including, without limitation, avoidance actions arising under chapter 5 of the Bankruptcy Code and actions under other relevant bankruptcy and non-bankruptcy laws to recover assets.
- (g) **Insiders.** In the circumstance where the Schedules and Statements require information regarding "insiders," the Debtors have included information with respect to certain individuals who served as officers and directors, as the case may be, during the relevant time periods. Such individuals may no longer serve in such capacities.

The listing or omission of a party as an insider for purposes of the Schedules and Statements is not intended to be, nor should it be, construed as an admission of any fact, right, claim, or defense and all such rights, claims, and defenses are hereby expressly reserved. Information regarding the individuals listed as insiders in the Schedules and Statements has been included for informational purposes only.
- (h) **Royalties.** The leases owned by the Debtors exist in some cases in long producing oil and gas fields. Although royalty payments have been made, payments may have been uncashed, and others may have been unpaid because the current living owners are unknown.
- (i) **P&A Liability.** The Debtors own wells that are at the end of life and may be subject to imminent plugging and abandonment liabilities. The Debtors have made an estimation as to the amount of what these liabilities might be.

3. **Methodology.**

- (a) **Basis of Presentation.** The Debtors relied on Opportune, an outside firm, to maintain Debtor's books and records. As such, critical books of account and

records were unavailable to Debtors and Debtors' advisors, including but not limited to the following deficiencies and hindrances:

- Books, records and general ledger accounts of all known current and former affiliates, including both Debtor and non-Debtor entities, were not available for examination. Additionally, some entities and affiliates were determined as having no known assets or claims.
- In examining available general ledger accounts, it appeared that not all transactions included account detail and certain transaction descriptions could be deciphered. Additionally, it appeared that there occurred extensive use of specialized or intermediary suspense accounts. Accordingly, Debtors' advisors were prevented from confirming corresponding transactions and classifications and therefore, prohibited from achieving a reconciliation of transactions. Further, Debtors' advisors were prevented from establishing a systematic approach to identifying transactions as ordinary course of business or accurately estimate revenue.
- Due to the lack of information or data, these Schedules and Statements rely on analysis which focused on transaction activity from HMH to other Debtors and not necessarily inter-Debtor or intra-Debtor transactions besides those occurring from HMH to other Debtors.
- Due to the opacity of the aforementioned details, Debtors' advisors cannot reasonably ascertain that they have fully captured all transactions of interest as requested in these Schedules and Statements. Additionally, some transactions have been classified, characterized, categorized, or designated giving benefit to the likelihood of the Court's interest in knowledge of such transactions without the certainty to accuracy of such classification, characterization, categorization or designation.

These Schedules and Statements do not purport to represent financial statements prepared in accordance with accounting principles generally accepted in the United States ("GAAP"), nor are they intended to fully reconcile to the financial statements prepared by the Debtors. These Schedules and Statements reflect the best available estimate of assets and liabilities of each separate Debtor, except where otherwise indicated. Information contained in the Schedules and Statements has been derived from the limited data extracted from the available Debtors' books and records and historical financial statements. Where possible, HMH has presented its oil and gas interests as real property, net of dispositions, depletion and impairments. The fair value and net realizable value of real and personal property may vary materially from the net book value presented herein.

Given, among other things, the uncertainty surrounding the collection and ownership of certain assets and the valuation and nature of certain liabilities, to the extent that a Debtor shows more assets than liabilities, this is not an admission that a Debtor was

solvent as of the Petition Date or at any time prior to the Petition Date. Likewise, to the extent a Debtor shows more liabilities than assets, this is not an admission that a Debtor was insolvent as of the Petition Date or any time prior to the Petition Date.

All asset and liability information, except where otherwise noted, is reflected through September 30, 2019.

- (b) **Confidential Information.** There may be instances in the Schedules and Statements where the Debtors deemed it necessary and appropriate to redact from the public record information such as names, addresses, or amounts. Generally, the Debtors have used this approach because of a confidentiality agreement between the Debtors and a third party, for the protection of sensitive commercial information, or for the privacy of an individual.
- (c) **Master Agreements.** Contracts and leases listed in the Schedules and Statements may be master agreements that cover relationships with some or all of the Debtors. Where relevant, such agreements have been listed in the Schedules and Statements only of the Debtor entity that signed the original umbrella or master agreement. Other Debtors, however, may be liable together with such Debtor on account of such agreements and the Debtors reserve all rights to amend the Schedules and Statements to reflect changes regarding the liability of the Debtors with respect to such agreements, if appropriate.
- (d) **Duplication.** Certain of the Debtors' assets, liabilities, and prepetition payments may properly be disclosed in multiple parts of the Statements and Schedules. To the extent these disclosures would be duplicative, the Debtors have endeavored to only list such assets, liabilities, and prepetition payments once.
- (e) **Net Book Value.** In certain instances, current market valuations for individual items of property and other assets are neither maintained by, nor readily available to the Debtors. Accordingly, unless otherwise indicated, the Debtors' Schedules and Statements reflect net book values where possible. **In certain instances, debtors' advisors were not provided with sufficient underlying details and schedules in order to properly assess book value.** Additionally, Market values may vary, in some instances, materially, from net book values presented as of September 30, 2019. The Debtors believe that it would be an inefficient use of estate assets for the Debtors to obtain the current market values of their property. Accordingly, the Debtors have indicated in the Schedules and Statements that the market values of certain assets and liabilities are undetermined. Also, assets that have been fully depreciated or that were expensed for accounting purposes either do not appear in these Schedules and Statements, or are listed with a zero-dollar value, as such assets have no net book value. The omission of an asset from the Schedules and Statements does not constitute a representation regarding the ownership of such asset, and any such omission does not constitute a waiver of any rights of the Debtors with respect to such asset.

- (f) **Undetermined Amounts.** The description of an amount as "unknown," is not intended to reflect upon the materiality of such amount.
- (g) **Unliquidated Amounts.** Claim amounts that could not be readily quantified by the Debtors are scheduled as "unliquidated." The description of an amount as "unknown," or "undetermined" is not intended to reflect upon the materiality of such amount. Any failure to designate a claim in the Schedules and Statements as "contingent," "unliquidated," or "disputed" does not constitute an admission by the Debtors that such claim or amount is not "contingent," "unliquidated," or "disputed." The Debtors reserve all rights to dispute, or to assert offsets or defenses to, any claim reflected on the Schedules and Statements on any grounds, including, but not limited to, amount, liability, priority, status, or classification, or to otherwise subsequently designate any claim as "contingent," "unliquidated," or "disputed."
- (h) **Totals.** All totals that are included in the Schedules and Statements represent totals of all known amounts. To the extent there are unknown or undetermined amounts, the actual total may be different from the listed total.
- (i) **Property and Equipment.** Unless otherwise indicated, owned property and equipment are valued at net book value. The Debtors may lease furniture, fixtures, and equipment from certain third-party lessors. To the extent possible, any such leases are listed in the Schedules and Statements. Nothing in the Schedules and Statements is, or should be construed as, an admission as to the determination of the legal status of any lease (including whether any lease is a true lease or a financing arrangement), and the Debtors reserve all rights with respect thereto.
- (j) **Credits and Adjustments.** The claims of individual creditors for, among other things, goods, products, services, or taxes are listed as the amounts entered on the Debtors' books and records and may either (i) not reflect credits, allowances, or other adjustments due from such creditors to the Debtors or (ii) be net of accrued credits, allowances, or other adjustments that are actually owed by a creditor to the Debtors on a post-petition basis on account of such credits, allowances, or other adjustments earned from prepetition payments and critical vendor payments, if applicable. The Debtors reserve all of their rights with regard to such credits, allowances, or other adjustments, including, but not limited to, the right to modify the Schedules, assert claims objections and/or setoffs with respect to the same, or apply such allowances in the ordinary course of business on a post-petition basis.

Intercompany Claims. The Debtors maintain business relationships with each other, conducting transactions from time to time that result in intercompany receivables and payables and/or are on account of capital contributions, equity investments, or distributions on account of equity investments. Known and assumed prepetition receivables and payables among and between the Debtors are reported on Schedule A/B, and Schedule E/F, respectively, per the Debtors' books and records. The listing of any amounts with respect to such receivables and

payables is not, and should not be construed as, an admission of the characterization of such balances as debt, equity, or otherwise.

- (k) **Guarantees and Indemnification Claims.** The Debtors have exercised commercially reasonable efforts to locate and identify guarantees of their executory contracts, unexpired leases, secured financings, and other such agreements. Where guarantees or indemnification claims have been identified, they have been included in the relevant Schedules E/F, G and H for the affected Debtor. The Debtors may have inadvertently omitted guarantees or indemnifications embedded in their contractual agreements and may identify additional guarantees or indemnifications as they continue to review their books and records and contractual agreements. The Debtors reserve their rights, but are not required, to amend the Schedules and Statements if additional guarantees are identified. In addition, the Debtors have entered into certain guarantees of debt and other obligations of other Debtors. The Debtors do not track these guarantees and thus have not listed them.
- (l) **Currency.** Unless otherwise indicated, all amounts are reflected in U.S. dollars.

4. **Specific Schedules Disclosures.**

- (a) **Schedules Summary.** Except as otherwise noted, the asset and liability totals represent amounts through September 30, 2019. The Company closes its books quarterly. Based on the size of the Company, the scope of its operations and internal accounting resources, a monthly close is not performed.
- (b) **Schedule A/B – Parts 1&2 - Cash and Cash Equivalents; Deposits and Prepayments.** Details with respect to the Debtors' bank accounts are provided in the Debtors' Schedules.
- (c) **Schedule A/B, Part 3 – Accounts Receivable, Item 11.** The Debtors' reported accounts receivable through September 30, 2019. Also, accounts receivable includes amounts that may be uncollectible. The Debtors are unable to determine with certainty what amounts will actually be collected.
- (d) **Schedule A/B, Part 4 – Investments; Non-Publicly Traded Stock and Interests in Incorporated and Unincorporated Businesses, including any Interest in an LLC, Partnership, or Joint Venture.** Ownership interests in subsidiaries, partnerships, and joint ventures have been listed in Schedule A/B, Part 4, as unknown amounts on account of the fact that the fair market value of such ownership is dependent on numerous variables and factors and may differ significantly from their net book value.
- (e) **Schedule A/B, Part 7 – Office Furniture, Fixtures, and Equipment; and Collectibles.** Debtors did not maintain an asset depreciation schedule.
- (f) **Schedule A/B, Part 8 – Machinery, equipment, & vehicles.** Debtors did not maintain an asset depreciation schedule.

- (g) **Schedule A/B, Part 9 – Real Property.** For those Debtors that own real property, such owned real estate is reported at book value, net of accumulated depreciation. The Debtors may have listed certain assets as real property when such assets are in fact personal property, or the Debtors may have listed certain assets as personal property when such assets are in fact real property. Any buildings and land improvements are listed on Schedule A/B, Part 9, independent of whether the real property to which the building or land improvement is connected is Debtor-owned property. The Debtors reserve all of their rights to re-categorize and/or re-characterize such asset holdings to the extent the Debtors determine that such holdings were improperly listed.

Certain of the instruments reflected on Schedule A/B 55 may contain renewal options, guarantees of payments, options to purchase, rights of first refusal, rights to lease additional lands, and other miscellaneous rights. Such rights, powers, duties, and obligations are not separately set forth on Schedule A/B. The Debtors hereby expressly reserve the right to assert that any instrument listed on Schedule A/B 55 is an executory contract or unexpired lease within the meaning of section 365 of the Bankruptcy Code. The Debtors reserve all of their rights, claims, and causes of action with respect to claims associated with any contracts and agreements listed on Schedule A/B 55, including their right to dispute or challenge the characterization or the structure of any transaction, document, or instrument, including any intercompany agreement.

- (h) **Schedule A/B, Part 11 – All Other Assets.** Debtors did not maintain an asset depreciation schedule.
- (i) ***Other Contingent and Unliquidated Claims or Causes of Action of Every Nature, including Counterclaims of the Debtors and Rights to Setoff Claims.*** In the ordinary course of their businesses, the Debtors may have accrued, or may subsequently accrue, certain rights to counterclaims, crossclaims, setoffs, credits, rebates, or refunds with their customers and suppliers, or potential warranty claims against their suppliers. Additionally, certain of the Debtors may be party to pending litigation in which such Debtor has asserted, or may assert, claims as a plaintiff or counterclaims and/or crossclaims as a defendant. Because such claims are unknown to the Debtors and not quantifiable as of the Petition Date, they are not listed on Schedule A/B, Part 11.
- (j) **Schedule D – Creditors Who Have Claims Secured by Property.** Except as otherwise agreed pursuant to a stipulation or order entered by the Court, the Debtors reserve their rights to dispute or challenge the validity, perfection, or immunity from avoidance of any lien purported to be granted or perfected in any specific asset to a secured creditor listed on Schedule D and reserve all rights to dispute or challenge the secured nature of any such creditor's claim or the characterization of the structure of any such transaction or any document or instrument related to such creditor's claim.

The descriptions provided in Schedule D are intended only to be a summary. Reference to the applicable agreements and other related relevant documents is necessary for a complete description of the collateral and the nature, extent, and priority of any liens. In certain instances, some of the Debtors may be a co-obligor, co-mortgagor, or guarantor with respect to scheduled claims of other Debtors, and no claim set forth on Schedule D of any Debtor is intended to acknowledge claims of creditors that are otherwise satisfied or discharged by other entities.

Schedule E/F – Creditors Who Have Unsecured Claims.

Part 2 - Creditors with Nonpriority Unsecured Claims. The liabilities identified in Schedule E/F, Part 2, are derived from the Debtors' books and records. The Debtors made a commercially reasonable attempt to set forth their unsecured obligations, although the actual amount of claims against the Debtors may vary from those liabilities represented on Schedule E/F, Part 2. The listed liabilities, which have been listed on a gross accounts' payable basis, may not reflect the correct amount of any unsecured creditor's allowed claims or the correct amount of all unsecured claims.

Schedule E/F, Part 2, contains information regarding certain compensation-related claims of insiders of the Debtors, with such claims being listed as "contingent," "unliquidated," and/or "disputed." In scheduling such claims, the Debtors make no representation or assertion as to the validity of such claims, and the Debtors reserve all rights, claims, and defenses in connection therewith.

Schedule E/F, Part 2, contains information regarding threatened or pending litigation involving the Debtors. The amounts for these potential claims are listed as "undetermined" and are marked as contingent, unliquidated, and disputed in the Schedules and Statements.

Schedule E/F, Part 2, does not include claims that may arise in connection with the rejection of any executory contracts and unexpired leases, if any, that may be or have been rejected.

In many cases, the claims listed on Schedule E/F, Part 2, arose, accrued, or were incurred on various dates or on a date or dates that are unknown to the Debtors or are subject to dispute. Where the determination of the date on which a claim arose, accrued, or was incurred would be unduly burdensome and costly to the Debtors' estates, the Debtors have not listed a specific date or dates for such claim.

As of the time of filing of the Schedules and Statements, the Debtors have not received all invoices for payables, expenses, and other liabilities that may have accrued prior to the Petition Date. Additionally, due to Opportune's denied access to records, Debtor is unable to provide confirmation of transaction activity past September 30, 2019. Accordingly, the information contained in Schedules D and

E/F may be incomplete. The Debtors reserve their rights, but undertake no obligations, to amend Schedules D and E/F if, or when, the Debtors receive such invoices.

- (k) **Schedule G – Executory Contracts and Unexpired Leases.** While commercially reasonable efforts have been made to ensure the accuracy of Schedule G, inadvertent errors or omissions may have occurred. Additionally, relationships between the Debtors and their vendors are often governed by a master services agreement, under which the Debtors also place work and purchase orders, which may be considered executory contracts. Disclosure of all of these purchase and work orders, however, is impracticable and unduly burdensome. Accordingly, to the extent the Debtors have determined to disclose non-confidential master services agreements in Schedule G, purchase and work orders placed thereunder may have been omitted.

In some cases, the same supplier or provider may appear multiple times in Schedule G. Multiple listings, if any, reflect distinct agreements between the applicable Debtor and such supplier or provider.

Although the Debtors have made diligent attempts to attribute an executory contract to its rightful Debtor, in certain instances, the Debtors may have inadvertently failed to do so due to the complexity and size of the Debtors' businesses. Accordingly, the Debtors reserve all of its rights with respect to the named parties of any and all executory contracts, including the right to amend Schedule G.

Omission of a contract or agreement from Schedule G does not constitute an admission that such omitted contract or agreement is not an executory contract or unexpired lease. Certain Debtors are guarantors and parties to guaranty agreements regarding the Debtors' prepetition credit facility. The guaranty obligations arising under these agreements are reflected on Schedules D and F only.

- (l) **Schedule H – Co-Debtors.** The Debtors **have** made reasonable efforts to locate and identify guaranties and other secondary liability claims (collectively, "**Guaranties**") in each of the executory contracts, unexpired leases, secured financings, debt instruments and other such agreements to which any Debtor is a party. Where Guaranties have been identified, they have been included in the relevant Schedule for the Debtor or Debtors providing such Guaranties. The Debtors have placed the Guaranties on Schedule H for both the primary obligor and the guarantor of the relevant obligation. Guaranties were additionally placed on Schedule D or E/F for each guarantor, except to the extent they are associated with obligations under an executory contract or unexpired lease identified on Schedule G. It is possible that certain Guaranties embedded in the Debtors' executory contracts, unexpired leases, secured financings, debt instruments and other such agreements may have been inadvertently omitted.

5. Specific Statements Disclosures.

- (a) **Statements, Part 1, Question 1 – Income.** Due to the circumstances outlined previously, the Debtors cannot accurately estimate income for 2019 or year to date.
- (b) **Statements, Part 2, Question 3 – Payments and Transfers to Certain Creditors within 90 Days.** The dates set forth in the “Dates” column relate to one of the following: (i) the date of a wire transfer; (ii) the date of an “ACH” processing; or (iii) the check date. Prior to the Petition Date, the Debtors maintained a centralized cash management system through which certain Debtors made payments on behalf of certain Debtor affiliates and certain non-debtor affiliates. Consequently, for the purpose of this schedule, payments are recorded on the Debtor’s Statements, Part 2, Question 3, based on the Debtor’s bank account owned.

Payments to the Debtors’ bankruptcy professionals, insiders, intercompany transactions, wage garnishments and donations are not included in the payments to creditors. Payments to the aforementioned parties are included in the following locations within the Statements: bankruptcy professionals (Question 11), insider (Question 4), intercompany (Question 4).

- (c) **Statements, Part 2, Question 4 – Payments and Transfers to Insiders.** To the extent: (i) a person qualified as an “insider” in the year prior to the Petition Date, but later resigned their insider status or (ii) did not begin the year as an insider, but later became an insider, the Debtors have only listed those payments made while such person was defined as an insider in Statements, Part 2, Question 4. Business travel arrangements, including flights and hotels, for certain of the Debtors’ directors and officers have been paid for by the Debtors’ corporate credit card. Such payments are listed in the response to Question 4 on the Statements.
- (d) **Statements, Part 2, Question 6 – Setoffs.** The Debtors routinely incur setoffs and net payments and record offsets in the ordinary course of business. Such setoffs, nettings and offsets may occur due to a variety of transactions or disputes including, but not limited to, joint- interest billings, intercompany transactions, counterparty settlements, pricing discrepancies, warranties, refunds, negotiations, or disputes between the Debtors and their operating partners or suppliers. These ordinary course setoffs and nettings are common to the industry. Due to the voluminous nature of setoffs and nettings, it would be unduly burdensome and costly for the Debtors to list each such transaction. Therefore, ordinary course set-offs are excluded from the Debtors’ responses to Question 6 of the Statements
- (e) **Statements, Part 3, Question 7 – Legal Actions or Assignments.** The Debtors do not know of any workers’ compensation claims in response to this question. However, if any become known the Debtors maintain that disclosure would be in violation of certain laws including HIPAA (Health Insurance Portability and Accountability Act of 1996).

- (f) **Statements, Part 6, Question 11 – Payments Related to Bankruptcy.** The payments provided in Question 11 are reported for the joint representation of the Debtors. The Debtors believe that it would be an inefficient use of the assets of the estates to allocate these payments on a Debtor-by-Debtor basis.
- (g) **Statements, Part 13, Question 30 – Payments, Distributions, or Withdrawals Credited or Given to Insiders.** Distributions by the Debtors to their respective directors and officers are listed on the attachment to Question 4.

6. Predecessor Business Combinations

Certain transactions were consummated on February 8, 2018 that resulted in Alta Mesa's acquisition of interests in Alta Mesa Holdings, LP ("**AMH**"), Alta Mesa Holdings GP, LLC and Kingfisher Midstream, LLC. Prior to the closing of the transaction, AMH was controlled by Debtor entity High Mesa, Inc. ("**HMI**"). During the fourth quarter of 2017, AMH sold certain oil and gas assets and liabilities. Immediately prior to the closing of the transaction, AMH distributed oil and gas assets and liabilities to HMI.

Alta Mesa has alleged that High Mesa Services LLC ("HMS"), a subsidiary of HMI is the obligor under two promissory notes in the principal amount of \$1.5 million and \$8.5 million. Alta Mesa has claimed that as of December 31, 2018, approximately \$1.7 million and \$11.7 million, respectively, were outstanding under the promissory notes including the accumulated interest cost. When the \$1.5 million promissory note allegedly became due on February 28, 2019, HMS made no payment as HMI disputes that it has any obligation to pay the \$1.5 million promissory note and the \$8.5 million promissory note to Alta Mesa. Alta Mesa is pursuing remedies in connection with securing repayment of the past due promissory note by HMS and the \$8.5 million promissory note, which allegedly matured on December 31, 2019.

Alta Mesa distributed oil and gas assets to a subsidiary of HMI, and certain subsidiaries of HMI agreed to indemnify and hold Alta Mesa harmless from any liabilities associated with those oil and gas assets, regardless of when those liabilities arose. Alta Mesa also entered into a management services agreement (the "MSA") with HMI whereby Alta Mesa agreed to provide management services to HMI which included both operational and administrative functions. At December 31, 2018, Alta Mesa alleged that HMI owed approximately \$10.0 million, which Alta Mesa claimed included amounts owed (i) under the MSA, (ii) from a duplicate revenue payment made to HMI and (iii) pursuant to payables arising prior to the transaction. Subsequent to year-end, Alta Mesa billed HMI an additional \$0.9 million for incremental MSA costs incurred and received approximately \$1.0 million in payments toward all amounts outstanding. HMI has disputed certain of these amounts. Alta Mesa is pursuing remedies under applicable law in connection with repayment of this receivable.

Additionally, Alta Mesa is co-guarantor under certain surety bonds with HMI, including bonds that cover oil and gas assets owned by them. The surety has requested posting of collateral, which includes HMI surety bonds in an amount of approximately \$15 million.

These Global Notes are in addition to the specific notes set forth in the Schedules and Statements of the individual Debtor entities. The fact that the Debtors have prepared a Global Note with respect to a particular Schedule or Statement and not as to others does not reflect and should not be interpreted as a decision by the Debtors to exclude the applicability of such Global Note to any or all of the Debtors' remaining Schedules or Statements, as appropriate. Disclosure of information in one Schedule, one Statement, or an exhibit or attachment to a Schedule or Statement, even if incorrectly placed, shall be deemed to be disclosed in the correct Schedule, Statement, exhibit, or attachment.

SPECIFIC DISCLOSURES WITH RESPECT TO THE DEBTORS' SCHEDULES

Schedule A/B 47	Vehicles: Vehicles listed are reported to be titled to the Debtor. There are other vehicles that may be in control of a Debtor entity which were not properly transferred following the transaction. The Debtor reserves all rights regarding the vehicles that may be in Debtor's possession but not properly titled and transferred and may amend these schedules as appropriate.
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Fill in this information to identify the case:Debtor name High Mesa, Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ 0.00**1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ 48,837.23**1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ 48,837.23**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ 736,845.48**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ 757,593.61**3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ 66,064,803.19**4. Total liabilities**
Lines 2 + 3a + 3b\$ 67,559,242.28

Fill in this information to identify the case:Debtor name High Mesa, Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. CitibankChecking8502Unknown**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$0.00**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. Prepaid Insurance - Account #xxx5338\$24,972.728.2. Prepaid Insurance - Account #xxx7719\$23,864.51

Debtor High Mesa, Inc.
Name

Case number (If known) _____

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$48,837.23**Part 3: Accounts receivable**10. **Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments13. **Does the debtor own any investments?**

- ☐ No. Go to Part 5.
☒ Yes Fill in the information below.

			Valuation method used for current value	Current value of debtor's interest
14.	Mutual funds or publicly traded stocks not included in Part 1 Name of fund or stock:			
15.	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture Name of entity:	% of ownership		
15.1.	<u>High Mesa Holdings GP, LLC</u>	<u>100%</u> %		Unknown
15.2.	<u>High Mesa Holdings, LP</u>	<u>100%</u> %		Unknown
15.3.	<u>High Mesa Services, LLC</u>	<u>100%</u> %		Unknown

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**
Describe:17. **Total of Part 4.**

Add lines 14 through 16. Copy the total to line 83.

\$0.00**Part 5: Inventory, excluding agriculture assets**18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

Debtor High Mesa, Inc.
Name

Case number (If known) _____

- ☒ No. Go to Part 8.
☐ Yes Fill in the information below.

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. See attached Exhibit B47 for Vehicles and Trailers No asset depreciation schedule. Condition unknown.	Unknown		Unknown

48. **Watercraft, trailers, motors, and related accessories** *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*49. **Aircraft and accessories**50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$0.0052. **Is a depreciation schedule available for any of the property listed in Part 8?**

- ☒ No
☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 9: Real property**54. Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.
☐ Yes Fill in the information below.

Part 11: All other assets**70. Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.

Debtor High Mesa, Inc.
Name

Case number (If known) _____

☐ Yes Fill in the information below.Current value of
debtor's interest

71.	Notes receivable Description (include name of obligor)		
72.	Tax refunds and unused net operating losses (NOLs) Description (for example, federal, state, local)		
	NOL Carryforward (as of 2018 Tax Return)	Tax year 2018	Unknown
73.	Interests in insurance policies or annuities Excess Liability Insurance (Policy No. JUMB101676) - Markel International Ins Co		Unknown
	Commercial General Liability (Policy No. JCGL101950) - Markel International Ins Co		Unknown
	Liability (Policy No. JOPA100037) - Markel International Ins Co		Unknown
	Vessel Pollution Policy (Policy No. 53-27559) - Water Quality Insurance Syndicate - Policy Limit: \$5,000,000.00		Unknown
	Commercial Hull & Machinery Insurance (Policy No. MH 5843920 11) - Zurich American Insurance Co. - Policy Limit: \$1,000,000.00		Unknown
	Oil and Gas Excess Liability (Policy No. JUMB101676) - J.H. Blades & Co., Inc. - Policy Limit: \$50,000,000.00		Unknown
	Directors and Officers (Policy No. 8251-0203) - Federal Insurance Company - Policy Limit: \$5,000,000.00		Unknown
	Casualty Insurance (Combined Cover Note No. JHB-CJP-2219 (A)) - J.H. Blades & Co., Inc.		Unknown
	Marine (Policy No. MH 5843920 10) - Zurich American Ins Co of IL		Unknown
	Pollution (Policy No. 50-27559) - Water Quality Insurance		Unknown
	Oil and Gas General Liability (Policy No. JCGL101950) - J.H. Blades & Co., Inc. - Policy Limit: \$2,000,000.00		Unknown

Debtor High Mesa, Inc.
Name

Case number (If known) _____

Oil Pollution Act (Policy No. JOPA100057) - J.H. Blades
Co., Inc. - Policy Limit: \$35,000,000.00Unknown

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**
75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**
76. **Trusts, equitable or future interests in property**
77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

Intercompany Accounts ReceivableUnknown

- 78.
- Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$0.00

- 79.
- Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No☐ Yes

Debtor **High Mesa, Inc.**
Name

Case number (If known) _____

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$0.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$48,837.23	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$0.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$0.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$0.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	\$0.00	
91. Total. Add lines 80 through 90 for each column	\$48,837.23	\$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$48,837.23

Fill in this information to identify the case:Debtor name High Mesa, Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	ANDREWS COUNTY TAX OFFICE Creditor's Name 210 NW 2ND STREET ANDREWS, TX 79714 Creditor's mailing address Creditor's email address, if known Date debt was incurred 2019 Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien See Exhibit B-55 Describe the lien Property Taxes Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$137.04	\$0.00
2.2	BCE-AMH HOLDINGS LLC Creditor's Name 1201 Louisiana Street Suite 3308 Houston, TX 77002 Creditor's mailing address Creditor's email address, if known Date debt was incurred 9-12-19 Last 4 digits of account number Do multiple creditors have an interest in the same property?	Describe debtor's property that is subject to a lien Describe the lien UCC Lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply	Unknown	\$0.00

Debtor **High Mesa, Inc.**

Case number (if know)

Name

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.☒ Contingent☒ Unliquidated☒ Disputed**2.3 BCE-MESA HOLDINGS LLC**

Creditor's Name

**1201 Louisiana Street
Suite 3308
Houston, TX 77002**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

9-12-19

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Unknown**\$0.00**

Describe the lien

UCC Lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed**2.4 BRAZOS COUNTY TAX ASSESSOR**

Creditor's Name

**4151 COUNTY PARK CT
BRYAN, TX 77802**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

2019

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

\$44.17**\$0.00****See Exhibit B-55**

Describe the lien

Property Taxes

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed**2.5 CAMERON PARISH TAX COLLECTOR**

Creditor's Name

**PO BOX 1250
CAMERON, LA 70631**

Creditor's mailing address

Describe debtor's property that is subject to a lien

\$2,442.24**\$0.00****See Exhibit B-55**

Describe the lien

Property Taxes

Debtor **High Mesa, Inc.**

Name

Case number (if know)

Creditor's email address, if known

Date debt was incurred

2019

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed**2.6 CHAPPY ENERGY, LLC**

Creditor's Name

**31 Hammock Dunes Place
Spring, TX 77389**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

9-12-19

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Unknown**\$0.00**

Describe the lien

UCC Lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed**2.7 CITY OF ST GABRIEL**

Creditor's Name

**PO BOX 597
ST GABRIEL, LA 70776**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

2019

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

\$827.35**\$0.00****See Exhibit B-55**

Describe the lien

Property Taxes

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed

Debtor **High Mesa, Inc.** Case number (if known) _____
Name

2.8	CORTLAND CAPITAL MARKET SERVICES LLC Creditor's Name 225 W. WASHINGTON STREET 21ST FLOOR Creditor's mailing address _____ Creditor's email address, if known _____ Date debt was incurred 10-08-15 Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. _____	Describe debtor's property that is subject to a lien _____ Describe the lien UCC Lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	\$0.00
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2.9	GALVESTON COUNTY TAX ASSESSOR Creditor's Name 722 MOODY GALVESTON, TX 77550 Creditor's mailing address _____ Creditor's email address, if known _____ Date debt was incurred 2019 Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. _____	Describe debtor's property that is subject to a lien See Exhibit B-55 _____ Describe the lien Property Taxes Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,626.26	\$0.00
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2.1 0	GONZALES COUNTY TAX ASSESSOR Creditor's Name PO BOX 677 GONZALES, TX 78629 Creditor's mailing address _____ Creditor's email address, if known _____ Date debt was incurred 2019	Describe debtor's property that is subject to a lien See Exhibit B-55 _____ Describe the lien Property Taxes Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)	\$248.20	\$0.00
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Debtor **High Mesa, Inc.**

Name

Case number (if know)

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed2.1
1 **IDAHO DEPARTMENT OF LANDS**

Creditor's Name

**300 NORTH 6TH STREET
STE 103
PO BOX 83720
BOISE, ID 83720-0050**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

2019

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

See Exhibit B-55**\$50,361.57****\$0.00**

Describe the lien

Property Taxes

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed2.1
2 **LA DEPT OF ENVIROMENTAL QLTY**

Creditor's Name

**DEQ FINANCIAL SERVICES
DIV
ATTN ACCOUNTS
RECEIVABLE
PO BOX 4311
BATON ROUGE, LA
70821-4311**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

2019

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

See Exhibit B-55**\$14,105.90****\$0.00**

Describe the lien

Property Taxes

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed

Debtor **High Mesa, Inc.**
Name

Case number (if know)

2.1
3 **LAVACA COUNTY TAX**
ASSESSOR

Creditor's Name

PO BOX 293
HALLETTSVILLE, TX 77964

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**2019****Last 4 digits of account number****Do multiple creditors have an**
interest in the same property?☒ No☐ Yes. Specify each creditor,
including this creditor and its relative
priority.

Describe debtor's property that is subject to a lien

See Exhibit B-55**\$627.79****\$0.00**

Describe the lien

Property Taxes

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**As of the petition filing date, the claim is:**

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed**2.1**
4 **LEON COUNTY TAX**
ASSESSOR

Creditor's Name

PO BOX 37
CENTERVILLE, TX
75833-0037

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**2019****Last 4 digits of account number****Do multiple creditors have an**
interest in the same property?☒ No☐ Yes. Specify each creditor,
including this creditor and its relative
priority.

Describe debtor's property that is subject to a lien

See Exhibit B-55**\$14.48****\$0.00**

Describe the lien

Property Taxes

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**As of the petition filing date, the claim is:**

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed**2.1**
5 **LOUISIANA DEPT OF**
NATURAL RES

Creditor's Name

PO BOX 44277
BATON ROUGE, LA
70804-4277

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**2019**

Describe debtor's property that is subject to a lien

See Exhibit B-55**\$3,624.48****\$0.00**

Describe the lien

Property Taxes

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Debtor **High Mesa, Inc.**

Name

Case number (if know)

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed2.1
6**Michael E. Ellis**

Creditor's Name

**16600 Park Row, Suite 158
Houston, TX 77084**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

9-12-19

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Unknown**\$0.00**

Describe the lien

UCC Lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Creditors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☒ Disputed2.1
7**PARISH OF IBERVILLE**

Creditor's Name

**PO DRAWER 231
PLAQUEMINE, LA
70765-0231**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

2019

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

\$5,188.63**\$0.00****See Exhibit B-55**

Describe the lien

Property Taxes

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Creditors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed2.1
8**ROBERTSON COUNTY TAX**

Describe debtor's property that is subject to a lien

\$325.81**\$0.00**

Debtor **High Mesa, Inc.**

Case number (if know)

Name

Creditor's Name

**PO BOX 220
FRANKLIN, TX 77856-0220**

Creditor's mailing address

Creditor's email address, if known

**Date debt was incurred
2019****Last 4 digits of account number****Do multiple creditors have an
interest in the same property?**☒ No☐ Yes. Specify each creditor,
including this creditor and its relative
priority.**See Exhibit B-55****Describe the lien****Property Taxes****Is the creditor an insider or related party?**☒ No☐ Yes**Is anyone else liable on this claim?**☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**As of the petition filing date, the claim is:**

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed2.1
9**ST BERNARD PARISH**

Creditor's Name

**PO BOX 168
CHALMETTE, LA
70043-0168**

Creditor's mailing address

Creditor's email address, if known

**Date debt was incurred
2019****Last 4 digits of account number****Do multiple creditors have an
interest in the same property?**☒ No☐ Yes. Specify each creditor,
including this creditor and its relative
priority.**Describe debtor's property that is subject to a lien****See Exhibit B-55****\$22,735.08****\$0.00****Describe the lien****Property Taxes****Is the creditor an insider or related party?**☒ No☐ Yes**Is anyone else liable on this claim?**☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**As of the petition filing date, the claim is:**

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed2.2
0**ST MARY PARISH
SHERIFFS OFFICE**

Creditor's Name

**PO BOX 610
PATTERSON, LA
70392-0610**

Creditor's mailing address

Creditor's email address, if known

**Date debt was incurred
2019****Last 4 digits of account number****Describe debtor's property that is subject to a lien****See Exhibit B-55****\$260,920.46****\$0.00****Describe the lien****Property Taxes****Is the creditor an insider or related party?**☒ No☐ Yes**Is anyone else liable on this claim?**☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Debtor **High Mesa, Inc.**

Case number (if know)

Name

Do multiple creditors have an interest in the same property?☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.**As of the petition filing date, the claim is:**

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed2.2
1**STATE OF DELAWARE**

Creditor's Name

**PO BOX 5509
BINGHAMTON, NY
13902-5509**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**2019****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

See Exhibit B-55**\$212,224.00****\$0.00**

Describe the lien

Property Taxes

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**As of the petition filing date, the claim is:**

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed2.2
2**STATE OF LOUISIANA
MINERAL BRD**

Creditor's Name

**617 N 3RD ST CAPITOL
COMPLEX
LASALLE OFFICE BLDG
BATON ROUGE, LA 70802**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**2019****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

See Exhibit B-55**\$137,392.02****\$0.00**

Describe the lien

Property Taxes

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**As of the petition filing date, the claim is:**

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed2.2
3**WETLANDS CAMERON
PARISH EXPERT**

Creditor's Name

**ONE GALERIA BLVD SUITE
2100
METAIRIE, LA 70001**

Describe debtor's property that is subject to a lien

See Exhibit B-55**\$20,000.00****\$0.00**

Debtor **High Mesa, Inc.**

Case number (if know)

Name

Creditor's mailing address

Describe the lien

Property Taxes

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Date debt was incurred

2019

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☒ Contingent☒ Unliquidated☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$736,845.48**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:Debtor name High Mesa, Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address Idaho Department of Environmental Qualit 1410 North Hilton Boise, ID 83706	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	\$0.00
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address IDAHO DEPARTMENT OF LANDS 300 NORTH 6TH STREET STE 103 PO BOX 83720 BOISE, ID 83720-0050	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$50,361.57	\$50,361.57
	Date or dates debt was incurred 2019	Basis for the claim: See Exhibit B-55		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	High Mesa, Inc.		Case number (if known)
	Name		

2.3	Priority creditor's name and mailing address Idaho Department of Lands 300 N. 6th Street, Suite 103 Boise, ID 83702	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input type="checkbox"/> No <input type="checkbox"/> Yes	

2.4	Priority creditor's name and mailing address Idaho Oil and Gas Conservation Commissio PO Box 83720 Boise, ID 83720-0050	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input type="checkbox"/> No <input type="checkbox"/> Yes	

2.5	Priority creditor's name and mailing address Idaho Secretary of State P.O.Box 83720 Boise, ID 83720-0080	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input type="checkbox"/> No <input type="checkbox"/> Yes	

2.6	Priority creditor's name and mailing address Idaho State Tax Commission 11321 W Chinden Blvd Garden City, ID 83714	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	High Mesa, Inc. Name	Case number (if known)
--------	--------------------------------	------------------------

2.7	Priority creditor's name and mailing address Internal Revenue Service Centralized Insolvency Operation Post Office Box 7346 Philadelphia, PA 19101-7346	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.8	Priority creditor's name and mailing address Internal Revenue Service Centralized Insolvency Operation Post Office Box 7346 Philadelphia, PA 19101-7346	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.9	Priority creditor's name and mailing address Louisiana Department of Wildlife and Fish 2000 Quail Dr Baton Rouge, LA 70808	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	\$0.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.10	Priority creditor's name and mailing address Louisiana Department of Natural Resource P.O. Box 94396 Baton Rouge, LA 70804-9396	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	\$0.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. Name	Case number (if known)
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2.11	Priority creditor's name and mailing address Louisiana Department Of Revenue 617 3rd St Baton Rouge, LA 70802	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.12	Priority creditor's name and mailing address Louisiana Secretary of State Commercial Division PO Box 94125 Baton Rouge, LA 70804-9125	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown \$0.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.13	Priority creditor's name and mailing address Michigan Department of Environ. 7953 Adobe Rd Kalamazoo, MI 49009	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.14	Priority creditor's name and mailing address Michigan Department of Treasury 430 W Allegan St Lansing, MI 48933	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
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Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. Name	Case number (if known)
2.15	Priority creditor's name and mailing address Oregon Secretary of State 900 Court Street NE Capitol Room 13 Salem, OR 97310-0722	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown \$0.00
<hr/>		
2.16	Priority creditor's name and mailing address Railroad Commission of Texas 1919 N Loop W #620 Houston, TX 77008	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown \$0.00
<hr/>		
2.17	Priority creditor's name and mailing address STATE OF DELAWARE PO BOX 5509 Binghamton, NY 13902	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$349,616.02 \$0.00
<hr/>		
2.18	Priority creditor's name and mailing address STATE OF DELAWARE PO BOX 5509 BINGHAMTON, NY 13902-5509	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$349,616.02 \$0.00

Debtor	High Mesa, Inc. Name		Case number (if known)
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2.19	Priority creditor's name and mailing address State of Louisiana, Fisherman Gear Comp. Post Office Box 44277 Baton Rouge, LA 70804	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$8,000.00	\$0.00
	Date or dates debt was incurred 10/7/2019	Basis for the claim: Pay State of Louisiana, Department of Natural Resources (Fishermen's Gear Compensation Fund).		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.20	Priority creditor's name and mailing address Texas Commission on Environmental Quality 2309 Gravel Dr Fort Worth, TX 76118	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.21	Priority creditor's name and mailing address Texas Comptroller of Public Accounts Lyndon B. Johnson State Office Building 111 East 17th Street Austin, TX 78774	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim	
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3.1	Nonpriority creditor's name and mailing address 3 & 1 Operating, ICN. c/o Brandy Kourtney 142 Loviette Lane DeQuincy, LA 70633	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	
	Date(s) debt was incurred _	Basis for the claim: <u>Litigation</u>		
	Last 4 digits of account number _	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.2	Nonpriority creditor's name and mailing address A LEROY ATWOOD 2663 NW 4TH AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.3	Nonpriority creditor's name and mailing address AARON J PAHL 1004 JONATHAN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.4	Nonpriority creditor's name and mailing address Ada County Assessors Office 190 E Front St # 107 Boise, ID 83702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.5	Nonpriority creditor's name and mailing address ADAM D CLINTON & 1147 NW 22ND STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.6	Nonpriority creditor's name and mailing address ADAMS AND REESE LLP DEPT 5208 PO BOX 2153 BIRMINGHAM, AL 35287-5208 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$52,416.77
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3.7	Nonpriority creditor's name and mailing address ADAMS VALVE SERVICE INC PO BOX 278 BOURG, LA 70343 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,210.30
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3.8	Nonpriority creditor's name and mailing address Aegis Development Company LLC c/o Patrick S. Ottinger 930 Coolidge Blvd Lafayette, LA 70503 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
High Mesa, Inc.		
3.9	Nonpriority creditor's name and mailing address Aegis Energy, Inc c/o Stanley B. Blackstone 345 Doucet, #201 Lafayette, LA 70503 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	Nonpriority creditor's name and mailing address AGILE DESIGN COMPANY POST OFFICE BOX 844 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.11	Nonpriority creditor's name and mailing address Ahmed Najee-Ullah c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.12	Nonpriority creditor's name and mailing address AHNSTED FAMILY 1998 REV TRUST 1255 ALLEN AVENUE APT 114 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.13	Nonpriority creditor's name and mailing address AIRGAS USA LLC PO BOX 676015 DALLAS, TX 75267-6015 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.14	Nonpriority creditor's name and mailing address ALBERT E SMITH & 2137 MAPLE CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.15	Nonpriority creditor's name and mailing address ALBERT OTTO REINS 5507A CORK PATH AUSTIN, TX 78745 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
3.16	High Mesa, Inc. Nonpriority creditor's name and mailing address ALBERTO M GONZALEZ & 1008 BRAEBURN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.17	Nonpriority creditor's name and mailing address Alden L. Kirk c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.18	Nonpriority creditor's name and mailing address ALFRED & NANCY ROZA REV LV TST 5080 HIGHWAY 72 NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.19	Nonpriority creditor's name and mailing address ALICE M SIMONSON 117 N WRIGHT BLVD LIBERTY LAKE, WA 99019 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.20	Nonpriority creditor's name and mailing address ALICIA DARLENE STAUFFER 6014 SOMERSET VALLEY DRIVE RICHARD, TX 77407 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,500.00
3.21	Nonpriority creditor's name and mailing address ALICIA HERRERA 1303 ASPEN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.22	Nonpriority creditor's name and mailing address ALLEN H SOLTERBECK & 8850 SOLTERBECK LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.23	Nonpriority creditor's name and mailing address ALLEN VAN CAMP 2142 LOCUST WAY FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.24	Nonpriority creditor's name and mailing address ALLIANT INSURANCE SERVICES INC 701 B ST 6TH FLOOR SAN DIEGO, CA 92101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$43,810.48
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3.25	Nonpriority creditor's name and mailing address ALMA BERRETH 312 N WASHINGTON AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.26	Nonpriority creditor's name and mailing address ALMAN J MEYER 1502 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.27	Nonpriority creditor's name and mailing address ALTA MESA ENERGY LLC 15021 Katy Fwy #400 Houston, TX 77094 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.28	Nonpriority creditor's name and mailing address ALTA MESA HOLDINGS LP 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.29	Nonpriority creditor's name and mailing address ALVIN SMITH C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.30	Nonpriority creditor's name and mailing address ALYSSIA M TOMKO 2263 KILLEBREW DRIVE PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.31	Nonpriority creditor's name and mailing address AMANDA M TSCHIDA 911 NW 24T ST FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.32	Nonpriority creditor's name and mailing address American Trading & Production Corp c/o Douglas Conrad Longman , Jr. Jones Walker 600 Jefferson St. Suite 1600 Lafayette, LA 70501 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.33	Nonpriority creditor's name and mailing address AMERIPRIDE LINEN & APPAREL 403 MAIN AVE W TWIN FALLS, ID 83301 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$414.47
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3.34	Nonpriority creditor's name and mailing address Amplify Energy LLC 13907 CARROLLWOOD VILLAGE RUN TAMPA, FL 33618 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.35	Nonpriority creditor's name and mailing address AMY J WARNER & 2059 SPRING CREEK DR FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.36	Nonpriority creditor's name and mailing address ANADARKO LAND CORP 1201 LAKE ROBBINS DR THE WOODLANDS, TX 77380 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc.	Case number (if known)	
	Name		
3.37	Nonpriority creditor's name and mailing address ANADARKO OGC COMPANY 200 W. Congress Ste. 900 Lafayette, LA 70505 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.38	Nonpriority creditor's name and mailing address ANADARKO PETROLEUM CORPORATION 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.39	Nonpriority creditor's name and mailing address ANALYTICAL LABORATORIES INC 1804 NORTH 33RD STREET BOISE, ID 83703-5814 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,064.00
3.40	Nonpriority creditor's name and mailing address Anderson Exploration Company, Incorporated c/o Charles R. Anderson 1632 Hodges Street Lake Charles, LA 70601 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.41	Nonpriority creditor's name and mailing address ANDRES GARCIA 1335 POPLAR DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.42	Nonpriority creditor's name and mailing address ANDREW K EHRLIN 1520 NW 26TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.43	Nonpriority creditor's name and mailing address ANDREW MURRY & 1007 BRAEBURN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.44	Nonpriority creditor's name and mailing address ANDREW PFEIFFER & 215 CRIMSON CIRCLE EAST FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.45	Nonpriority creditor's name and mailing address ANDREWS COUNTY TAX OFFICE 210 NW 2ND STREET ANDREWS, TX 79714 Date(s) debt was incurred <u>2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$137.04
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3.46	Nonpriority creditor's name and mailing address Angela R. Crutcher c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.47	Nonpriority creditor's name and mailing address ANITA ZINK 2607 WINESAP AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.48	Nonpriority creditor's name and mailing address ANTHONY E HOWARD 2741 SPRUCE DR FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.49	Nonpriority creditor's name and mailing address ANTHONY O ANDRADE JR 8505 WASHOE RD PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.50	Nonpriority creditor's name and mailing address APACHE CORPORATION 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
3.51	High Mesa, Inc. Nonpriority creditor's name and mailing address Apache Corporation (of Delaware) c/o CT Corporation 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.52	Nonpriority creditor's name and mailing address Apache Corporation, successor in interes CT Corp System 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.53	Nonpriority creditor's name and mailing address APPLEWOOD ESTATES POST OFFICE BOX 521 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.54	Nonpriority creditor's name and mailing address ARCADIA OPERATING LLC DEPT D1810203 PO BOX 650002 DALLAS, TX 75265 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,739.54
3.55	Nonpriority creditor's name and mailing address ARCHROCK SERVICES PO BOX 201160 DALLAS, TX 75320-1160 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$35,163.24
3.56	Nonpriority creditor's name and mailing address ARDA F HERRERA 809 VICTORIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.57	Nonpriority creditor's name and mailing address Ardoin Limited Partnership c/o Veron Bice Palermo & Wilson LLC P O Box 2125 Lake Charles, LA 70602-2125 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.58	Nonpriority creditor's name and mailing address ARDOIN LIMITED PARTNERSHIP C/O VERON, BICE, PALERMO, & WILSON, LLC PO BOX 2125 LAKE CHARLES, LA 70602 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.59	Nonpriority creditor's name and mailing address ARLENE E HOUSER & 601 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.60	Nonpriority creditor's name and mailing address ARMANDO G & KIMI ESTILLORE 2680 BAYBERRY DR FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.61	Nonpriority creditor's name and mailing address ARTHUR C JOHNSON & WEST 421 RIVERSIDE SUITE 1081 SPOKANE, WA 99201 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.62	Nonpriority creditor's name and mailing address Arthur L. Najee-Ullah c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.63	Nonpriority creditor's name and mailing address ARTHUR N LYNCH & 8048 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.64	Nonpriority creditor's name and mailing address ARWYN LARSON 511 WHITETAIL AVE FRUITLAND, ID 83619-2816 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.65	Nonpriority creditor's name and mailing address Ascension Parish Assessor's Office 300 Houmas St Donaldsonville, LA 70346 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.66	Nonpriority creditor's name and mailing address Asset Retirement Obligation (estimated) Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,936,743.00
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3.67	Nonpriority creditor's name and mailing address Asset Retirement Obligation (estimated) Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,166,820.00
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3.68	Nonpriority creditor's name and mailing address Asset Retirement Obligation (estimated) Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$693,632.00
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3.69	Nonpriority creditor's name and mailing address Asset Retirement Obligation (estimate) Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,787.91
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3.70	Nonpriority creditor's name and mailing address Asset Retirement Obligation (estimate) Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$549,863.80
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3.71	Nonpriority creditor's name and mailing address Asset Retirement Obligation (estimate) Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,041.02
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.72	Nonpriority creditor's name and mailing address Asset Retirement Obligation (estimate) Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,479,149.10
3.73	Nonpriority creditor's name and mailing address ASSIGNMENT - DIVERSIFIED RESOURCES, INC. 16600 Park Row, Suite 158 HOUSTON, TX 77084 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Unknown
3.74	Nonpriority creditor's name and mailing address ASSIGNMENT OF OIL AND GAS WORKING INTERE 16600 Park Row, Suite 158 HOUSTON, TX 77084 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.75	Nonpriority creditor's name and mailing address AT& L ENERGY LLC Austin Lafferty 220 W Sixth St Watonga, OK 73772 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.76	Nonpriority creditor's name and mailing address ATC GROUP SERVICES LLC DEPT 2630 PO BOX 11407 BIRMINGHAM, AL 35246-2630 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,246.00
3.77	Nonpriority creditor's name and mailing address ATCHAFALAYA MEASUREMENT INC PO BOX 677208 DALLAS, TX 75267-7208 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,148.30
3.78	Nonpriority creditor's name and mailing address Atlanta Guardian Company, LLC 4035 Jefferson Ave. Texarkana, AR 71854 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Debtor resigned as operator.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.79	Nonpriority creditor's name and mailing address Atlantic Richfield Company c/o Liskow & Lewis One Shell Square 701 Poydras St., Suite 5000 New Orleans, LA 70139-5099 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.80	Nonpriority creditor's name and mailing address AUDREY CLINTON 9196 PHANTOM CT MIDDLETON, ID 83644 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.81	Nonpriority creditor's name and mailing address B A S F Corp c/o Robert Benn Vincent, Jr Kean Miller P O Box 3513 Baton Rouge, LA 70821 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.82	Nonpriority creditor's name and mailing address B P America Production Co c/o George Arceneaux, III Liskow & Lewis P O Box 52008 Lafayette, LA 70505 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.83	Nonpriority creditor's name and mailing address B&J FAMILY LLC P O BOX 706 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.84	Nonpriority creditor's name and mailing address B.E.E.M. OIL AND GAS COMPANY, INC 26619 Oakridge Drive The Woodlands, TX 77380 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.85	Nonpriority creditor's name and mailing address BAIRD HANSON WILLIAMS LLP 2117 Hillway Drive Boise, ID 83702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.86	Nonpriority creditor's name and mailing address BAKER HUGHES BUSINESS SUPPORT PO BOX 301057 DALLAS, TX 75303-1057 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$38,332.70 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.87	Nonpriority creditor's name and mailing address BALL'S BOAT RENTAL LLC 1868 DR BEATROUS RD THERIOT, LA 70397 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,389.26 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.88	Nonpriority creditor's name and mailing address BALLARD EXPLORATION CO INC 1021 MAIN STREET SUITE 2310 HOUSTON, TX 77002-6602 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$9.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.89	Nonpriority creditor's name and mailing address Ballard Exploration Co Inc c/o Michael G Durand Onebane Law Firm P O Box 3507 Lafayette, LA 70502-3507 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.90	Nonpriority creditor's name and mailing address BANDED IRON US INC PO BOX 51475 LAFAYETTE, LA 70505-1475 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$27,162.53 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.91	Nonpriority creditor's name and mailing address Bank One Texas N-Et al 600 Travis Street, Suite 6500 Houston, TX 77002 Date(s) debt was incurred <u>02/01/2005</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.92	Nonpriority creditor's name and mailing address BARBARA ADY 113 SADDLETREE ROAD SHAVANO PARK, TX 78231 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Name	Case number (if known)
3.93	High Mesa, Inc. Nonpriority creditor's name and mailing address BARBARA CHAMPION 426 16TH AVENUE NORTH PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.94	Nonpriority creditor's name and mailing address BARBARA J CLARK 11110 W AMITY ROAD BOISE, ID 83709 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.95	Nonpriority creditor's name and mailing address BARBARA J WILSON 2691 BAYBERRY DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.96	Nonpriority creditor's name and mailing address BARBARA L GRIME 217 GIST DR LIGONIER, PA 15658 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.97	Nonpriority creditor's name and mailing address BARBARA WILSON C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.98	Nonpriority creditor's name and mailing address BARRETT RESOURCES 1515 Arapahoe Street Tower 3 Suite 1000 Denver, CO 80202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.99	Nonpriority creditor's name and mailing address BASF CORPORATION 400 Convention Street Suite 700 Baton Rouge, LA 70802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	Name	Case number (if known)
3.100	High Mesa, Inc. Nonpriority creditor's name and mailing address Bay Coquille Inc c/o Daniel B Stanton Kean Miller 909 Poydras St Ste 3600 New Orleans, LA 70112 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.101	Nonpriority creditor's name and mailing address BCE-AMH HOLDINGS LLC 1201 Louisiana Street Suite 3308 Houston, TX 77002 Date(s) debt was incurred <u>09/13/2019</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.102	Nonpriority creditor's name and mailing address BEAU E CLOVER 1341 POPLAR AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.103	Nonpriority creditor's name and mailing address BECK BROS INC PO BOX 712 BEE COUNTY, TX 78102 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$25,606.50
3.104	Nonpriority creditor's name and mailing address BEL OIL CORPORATION 1911 Bel Oil Road Elton, LA 70532 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.105	Nonpriority creditor's name and mailing address BENJAMIN L COX 1005 NW 24TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.106	Nonpriority creditor's name and mailing address BENNY ESLI STEENSON & 1800 HEITZ AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.107	Nonpriority creditor's name and mailing address Bepco, LP c/o Robert B. McNeal Liskow & Lewis, One Shell Square 701 Poydras St., Suite 5000 New Orleans, LA 70139-5099 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.108	Nonpriority creditor's name and mailing address BERNIECE M & HARVEY D EASTON 8172 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.109	Nonpriority creditor's name and mailing address BERT D TORKELESON 7857 ELMORE ROAD FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.110	Nonpriority creditor's name and mailing address BETTY BUCKWALTER MAULE 1840 WILBUR RD ROSEBURG, OR 97470 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.111	Nonpriority creditor's name and mailing address BETTY CARVIN C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.112	Nonpriority creditor's name and mailing address BETTY L. FREEMAN C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.113	Nonpriority creditor's name and mailing address BEVERLY J ALDRICH 8140 DUTCH LN PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.114	Nonpriority creditor's name and mailing address BIG D'S SEAFOOD INC 459 ALICE B ROAD FRANKLIN, LA 70538 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,057.90
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3.115	Nonpriority creditor's name and mailing address BIG WILLOW CREEK COMPANY 5433 BIG WILLOW ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.116	Nonpriority creditor's name and mailing address Biloxi Marsh Lands Corporation c/o Timothy W.Cerniglia 4913 Newlands Street Metairie, LA 70006 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,000,000.00
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3.117	Nonpriority creditor's name and mailing address BISHOP PROPERTIES, LLC 315 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.118	Nonpriority creditor's name and mailing address BISHOP RANCH HOMEOWNERS ASSOC P O BOX 859 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.119	Nonpriority creditor's name and mailing address BK CONSTRUCTION LLC PO BOX 802 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.120	Nonpriority creditor's name and mailing address BLACK CANYON RANCHES, INC 1205 DELMAR AVENUE PARMA, ID 83660 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.121	Nonpriority creditor's name and mailing address Black Elk Energy Offshore 11451 Katy Fwy Houston, TX 77079 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Asset Retirement Obligation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.122	Nonpriority creditor's name and mailing address BLAINE & TERI MAY FAMILY TRUST 8029 DUTCH LANE PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.123	Nonpriority creditor's name and mailing address BLAKENERGY LTD 2211 RAYFORD ROAD SUITE 111 #40 SPRING, TX 77386 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.124	Nonpriority creditor's name and mailing address BLAKENERGY OPERATING LLC 2211 RAYFORD ROAD SUITE 111 #40 SPRING, TX 77386 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,911.66
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3.125	Nonpriority creditor's name and mailing address BLANK ROME LLP ATTN FINANCE DEPT ONE LOGAN SQUARE 130 NORTH 18TH STREET PHILADELPHIA, PA 19103-6998 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$128,045.93
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3.126	Nonpriority creditor's name and mailing address Blue Shale c/o Kenneth Miller Miller Law Offices PLLC 936 E.Park Ave Suite 2 Fairmont, WV 26555 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300,000.00
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3.127	Nonpriority creditor's name and mailing address BOB J SNYDER & 1483 POPLAR AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.128	Nonpriority creditor's name and mailing address BOBBIE L. COLLEE C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.129	Nonpriority creditor's name and mailing address BOBBY J CARBAJAL 2139 BISHOP AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.130	Nonpriority creditor's name and mailing address BOYD C JACKSON & 2638 DOGWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.131	Nonpriority creditor's name and mailing address BOYD YEE 4393 SILVER LEAF EXT EMMETT, ID 83617 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.132	Nonpriority creditor's name and mailing address BP AMERICA INC. 501 WESTLAKE PARK BLVD HOUSTON, TX 77079 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.133	Nonpriority creditor's name and mailing address BP AMERICA PRODUCTION COMPANY 225 WESTLAKE PARK BLVD HOUSTON, TX 77079 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.134	Nonpriority creditor's name and mailing address BRAD J HOLT 1002 JONATHAN ST FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.135	Nonpriority creditor's name and mailing address BRAD L BARLOW & 2264 NE 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.136	Nonpriority creditor's name and mailing address Brammer Engineering Inc c/o Daniel B Stanton Kean Miller 909 Poydras St Ste 3600 New Orleans, LA 70112 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.137	Nonpriority creditor's name and mailing address BRAZOS COUNTY TAX ASSESSOR 4151 COUNTY PARK CT BRYAN, TX 77802 Date(s) debt was incurred <u>2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$44.17
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3.138	Nonpriority creditor's name and mailing address BREITBURN OPERATING LP PO BOX 204662 DALLAS, TX 75320-4662 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,736.08
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3.139	Nonpriority creditor's name and mailing address BRENDA LEE LANGHAM P O BOX 909 SHEPHERD, TX 77371 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,333.33
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3.140	Nonpriority creditor's name and mailing address BRETT L MOORE & 4988 LITTLE WILLOW ROAD PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.141	Nonpriority creditor's name and mailing address Brett L. Moore c/o Fisher Rainey Hudson 956 W Bannock St Suite 630 Boise, ID 83702 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation - Multiple claimants \$500,000 Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.142	Nonpriority creditor's name and mailing address BRIAN D BUFFINGTON 2410 ALDER FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.143	Nonpriority creditor's name and mailing address Brian K. Shields, II c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.144	Nonpriority creditor's name and mailing address BRIAN R VANDEROORD 2729 DOGWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.145	Nonpriority creditor's name and mailing address BRIDGE ENERGY INC 1580 LINCOLN STREET SUITE 1110 DENVER, CO 80203 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.146	Nonpriority creditor's name and mailing address BRIDGE RESOURCES CORP 1580 Lincoln Street Suite 1110 Denver, CO 80203 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.147	Nonpriority creditor's name and mailing address BRITTANY V SANDOVAL 1510 NW 26TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.148	Nonpriority creditor's name and mailing address BROCK A GROSDIDIER & 1907 HEITZ AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.149	Nonpriority creditor's name and mailing address BROCK KIDDER 203 MIRAMAR BLVD LAFAYETTE, LA 70508 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$489.05 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.150	Nonpriority creditor's name and mailing address BROOKS J WARRINGTON 7897 ELMORE ROAD FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.151	Nonpriority creditor's name and mailing address BRUCE A PETERSON & PO BOX 706 FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.152	Nonpriority creditor's name and mailing address BRUCE A WHITE & 2139 MAPLE CT FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.153	Nonpriority creditor's name and mailing address BRUCE E BUCHANAN & 207 NW 9TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.154	Nonpriority creditor's name and mailing address BRUCE E FARLEY 7920 ELMORE RD FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.155	Nonpriority creditor's name and mailing address BRUCE J COWGILL & 1009 VICTORIA AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Name	Case number (if known)
Debtor	High Mesa, Inc.	
3.156	Nonpriority creditor's name and mailing address BUFFALO ROCK COMPANY INC PO BOX 2247 BIRMINGHAM, AL 35202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. \$423.28 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.157	Nonpriority creditor's name and mailing address Bureau of Ocean Energy Management 45600 Woodland Rd Sterling, VA 20166 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.158	Nonpriority creditor's name and mailing address BUREAU OF RECLAMATION WEST-230 COLLINS RD BOISE, ID 83702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.159	Nonpriority creditor's name and mailing address BURLINGTON RESOURCES OIL & GAS 717 Texas Avenue Houston, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.160	Nonpriority creditor's name and mailing address BURLINGTON RESOURCES OIL & GAS COMPANY L C/O CORPORATION SERVICE COMPANY 320 SOMERULOS ST. BATON ROUGE, LA 70802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.161	Nonpriority creditor's name and mailing address BURNS WALL SMITH & MUELLER PC 303 East 17th Avenue Suite 800 Denver, CO 80203 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.162	Nonpriority creditor's name and mailing address Byron E. Crutcher c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.163	Nonpriority creditor's name and mailing address C & H PROPERTIES LLC PO BOX 1202 MOUNTIAN HOME, ID 83647 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.164	Nonpriority creditor's name and mailing address C & J WELL SERVICES PO BOX 975682 DALLAS, TX 75397-5682 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$52,043.42
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3.165	Nonpriority creditor's name and mailing address C F Henry Properties LLC c/o Veron Bice Palermo & Wilson LLC P O Box 2125 Lake Charles, LA 70602-2125 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.166	Nonpriority creditor's name and mailing address C H FENSTERMAKER & ASSOC LLC ATTN ACCOUNTS RECEIVABLE PO BOX 52106 LDYWRRW, LA 70505 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,223.56
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3.167	Nonpriority creditor's name and mailing address C.F. HENRY PROPERTIES C/O LAW OFFICES OF ASHLEY E. PHILEN PO BOX 11652 NEW IBERIA, LA 70562 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.168	Nonpriority creditor's name and mailing address CABOT OIL & GAS CORPORATION CODY ENERGY, 400 Poydras St. Ste. 1812 New Orleans, LA 70130 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.169	Nonpriority creditor's name and mailing address Calhoun County Tax Assessor / Collector 211 S Ann St Port Lavaca, TX 77979 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.170	Nonpriority creditor's name and mailing address CALIX OIL COMPANY 1035 N. McDowell Boulevard Petaluma, CA 94954 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.171	Nonpriority creditor's name and mailing address Callon Offshore Production Inc c/o Richard Stuart Pabst Kean Miller LLP, First Bank & Trust Towe 909 Poydras Street Suite 3600 New Orleans, LA 70112 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.172	Nonpriority creditor's name and mailing address CAMERON PARISH TAX COLLECTOR PO BOX 1250 CAMERON, LA 70631 Date(s) debt was incurred <u>2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,442.24
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3.173	Nonpriority creditor's name and mailing address Camex Operating Co c/o Ottinger Hebert P O Drawer 52606 Lafayette, LA 70505-2606 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.174	Nonpriority creditor's name and mailing address CAMEX, INC. PO BOX 51733 LAFAYETTE, LA 70505 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.175	Nonpriority creditor's name and mailing address CANADIANOXY OFFSHORE PRODUCTION COMPANY 12790 Merit Drive Suite 800 Dallas, TX 75251 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.176	Nonpriority creditor's name and mailing address CanadianOxy Offshore Production, Inc. c/o CanadianOxy Offshore Production Co. 12790 Merit Drive, Ste. 800 Dallas, TX 75251 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
3.177	High Mesa, Inc. CANAL DIESEL SERVICES INC 2716 SOUTHWEST DR NEW IBERIA, LA 70560 Date(s) debt was incurred ____ Last 4 digits of account number ____	\$512.33 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.178	CANDACE JEAN ATKINS 1505 LUCILLE AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.179	CANYON County Tax Assessor 1115 Albany St Caldwell, ID 83605 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.180	CARIE JACKSON 2125 KILLEBREW DRIVE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.181	CARL H GUTSHALL JR & 4375 BLAINE RD NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.182	CARL HENDERSON 8399 WASHOE RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.183	CARLENE M CAMPO 2804 SPRUCE DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.184	Nonpriority creditor's name and mailing address CARMEN PEREZ 973 SHAMROCK CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.185	Nonpriority creditor's name and mailing address CAROL HILLSBERRY 1845 SW 3RD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.186	Nonpriority creditor's name and mailing address CAROL M. SCOTT C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.187	Nonpriority creditor's name and mailing address CAROL S WININGER 1085 NW 2ND AVE ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.188	Nonpriority creditor's name and mailing address CAROLINE K PARSONS 1504 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.189	Nonpriority creditor's name and mailing address CAROLYN D TAYLOR 4340 EAST BLANCHE DRIVE PHOENIX, AZ 85032 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.190	Nonpriority creditor's name and mailing address CAROLYN SUE MICHE' 2300 WATERWHEEL ROAD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.191	Nonpriority creditor's name and mailing address CARREN M POFF 2693 BAYBERRY DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.192	Nonpriority creditor's name and mailing address CARRIE L GRANT 2683 BAYBERRY DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.193	Nonpriority creditor's name and mailing address CARUTHERS PRODUCING CO., INC 901 Lakeshore Drive Suite 900 Lake Charles, LA 70602 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.194	Nonpriority creditor's name and mailing address CASCADE FENCE COMPANY INC 151 N LINDER RD MERIDIAN, ID 83642 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$250.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.195	Nonpriority creditor's name and mailing address CASIMIRO PALOMO JR 1006 JONATHAN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.196	Nonpriority creditor's name and mailing address Cassia County Assessor 203 E 15th St Burley, ID 83318 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.197	Nonpriority creditor's name and mailing address Castex Energy Inc c/o James Michael Fussell , Jr Ottinger Hebert P O Drawer 52606 Lafayette, LA 70505-2606 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.198	Nonpriority creditor's name and mailing address CATHERINE E CATE P O BOX 279 FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.199	Nonpriority creditor's name and mailing address CATHERINE M OGAWA 857 TRIAND DRIVE ONTARIO, OR 97914 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.200	Nonpriority creditor's name and mailing address Celestine Singleton Batiste 482 Lake Long Drive Houma, LA 70364 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.201	Nonpriority creditor's name and mailing address CENTRAL BOAT RENTALS INC PO BOX 120422 DEPT 0422 DALLAS, TX 75312-0422 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$515.14
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3.202	Nonpriority creditor's name and mailing address CENTRAL MICHIGAN CEMENTING SERVICES LLC 1934 COMMERCIAL DRIVE MT PLEASANT, MI 48858 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,350.25
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3.203	Nonpriority creditor's name and mailing address Century Exploration New Orleans Inc c/o James Michael Fussell , Jr Ottinger Hebert P O Drawer 52606 Lafayette, LA 70505-2606 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.204	Nonpriority creditor's name and mailing address CHAD GERALD TILLET & 2614 WINESAP AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.205	Nonpriority creditor's name and mailing address Chambers County Tax Office 405 S Main St Anahuac, TX 77514 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.206	Nonpriority creditor's name and mailing address CHAPPY ENERGY, LLC 31 Hammock Dunes Place Spring, TX 77389 Date(s) debt was incurred <u>09/13/2019</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.207	Nonpriority creditor's name and mailing address CHARLENE AND GERALD STELLING 6400 WHITLEY DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.208	Nonpriority creditor's name and mailing address CHARLENE K QUADE 4802 E ARROW JUNCTION DR BOISE, ID 83716 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.209	Nonpriority creditor's name and mailing address CHARLES A HUFF & 7256 CUSTER ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.210	Nonpriority creditor's name and mailing address CHARLES BAINES & 2130 NE 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.211	Nonpriority creditor's name and mailing address CHARLES COFFMAN & 16721 SE WEBSTER RD MILWAUKIE, OR 97267 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.212	Nonpriority creditor's name and mailing address CHARLES E ANDERSON JR & 6390 ADAMS ROAD NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.213	Nonpriority creditor's name and mailing address CHARLES E MCBEE 1204 TARA CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.214	Nonpriority creditor's name and mailing address CHARLES F. MCELROY C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.215	Nonpriority creditor's name and mailing address CHARLES N & DIANNE M KINNEY PO BOX 159 PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.216	Nonpriority creditor's name and mailing address CHARLES O CRAWLEY & 309 NW 9TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.217	Nonpriority creditor's name and mailing address CHARLES P. NORMAN, SR. C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.218	Nonpriority creditor's name and mailing address CHARLES R STILES 1303 TARA CT. FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. Name	Case number (if known)
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3.219	Nonpriority creditor's name and mailing address CHARLES R WINEGAR & 5350 SOUTH WHITLEY DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.220	Nonpriority creditor's name and mailing address CHARLES W OTTE JR & 1208 JESSICA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.221	Nonpriority creditor's name and mailing address CHARTER PIPE LLC 9720 CYPRESSWOOD DR SUITE 218 HOUSTON, TX 77070 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,106.44
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3.222	Nonpriority creditor's name and mailing address CHASE & PAPER CO PC PO BOX 166933 IRVING, TX 75016 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,316.00
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3.223	Nonpriority creditor's name and mailing address CHERYL A NEACE 1331 POPLAR AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.224	Nonpriority creditor's name and mailing address CHERYL A SMITH FAMILY TRUST 2605 ROME AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.225	Nonpriority creditor's name and mailing address CHESAPEAKE APPALACHIA LLC 900 Pennsylvania Avenue Charleston, WV 25302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.226	Nonpriority creditor's name and mailing address CHESAPEAKE OPERATING INC PO BOX 650841 DALLAS, TX 75265-0841 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.227	Nonpriority creditor's name and mailing address CHET & ANN CARPENTER TRUST 7188 ELMORE RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.228	Nonpriority creditor's name and mailing address CHEVRON U.S.A. INC. 400 Convention Street Suite 700 Baton Rouge, LA 70821 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.229	Nonpriority creditor's name and mailing address CHEVRON USA 6001 Bollinger Canyon Road San Ramon, CA 94583 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.230	Nonpriority creditor's name and mailing address Chevron USA Inc. successor in interest The Prentice-Hall Corporation System, In 501 Louisiana Ave Baton Rouge, LA 70802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.231	Nonpriority creditor's name and mailing address Chevron USA Holdings, Inc. c/o Louis Victor Gregoire , Jr. Kean Miller, II City Plaza 400 Convention St., Suite 700 Baton Rouge, LA 70802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.232	Nonpriority creditor's name and mailing address CHEVRON USA, INC. C/O CORPORATION SERVICE COMPANY 320 SOMERULOS ST. BATON ROUGE, LA 70802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.233	Nonpriority creditor's name and mailing address CHOICE FURNITURE SOURCE LLC 10515 HARWIN DR # 150 SUITE 200 HOUSTON, TX 77036 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,032.40 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.234	Nonpriority creditor's name and mailing address CHRISTOPHER AITKENS C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.235	Nonpriority creditor's name and mailing address CHRISTOPHER GORDON PRESTON & 2601 WINESAP AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.236	Nonpriority creditor's name and mailing address CHRISTOPHER HAMPTON 1583 PONDEROSA FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.237	Nonpriority creditor's name and mailing address CHRISTOPHER J LOWRY & 8360 DUTCH LANE PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.238	Nonpriority creditor's name and mailing address CHRISTOPHER L MIO & 7235 BOISE ROAD FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.239	Nonpriority creditor's name and mailing address CHRISTOPHER LEE HOLLOWAY & 2698 BAYBERRY DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.240	Nonpriority creditor's name and mailing address CINDY M STICE 2603 APPLEWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.241	Nonpriority creditor's name and mailing address CINTAS CORPORATION #543 101 VENTURE WAY LAFAYETTE, LA 70507 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,473.61
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3.242	Nonpriority creditor's name and mailing address CIT TECHNOLOGY FIN SERV INC 21146 NETWORK PLACE CHICAGO, IL 60673-1211 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,106.94
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3.243	Nonpriority creditor's name and mailing address CITY OF ST GABRIEL PO BOX 597 ST GABRIEL, LA 70776 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$827.35
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3.244	Nonpriority creditor's name and mailing address CLARA JACOBS C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.245	Nonpriority creditor's name and mailing address CLARENCE E HOWELL & 11785 N RIVER RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.246	Nonpriority creditor's name and mailing address CLARK ROLAND & 8750 YEAGER LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
3.247	High Mesa, Inc. CLEAN GULF ASSOCIATES PO BOX 4869 HOUSTON, TX 77210-4869 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.248	Clementine Clerk c/o Christie Hancock Jones Attorney Ad Litem 1202 W Church St Livingston, TX 77351 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.249	CLIFFORD L FIVECOAT TRUST 9724 UPPER AVE EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.250	CLIFTON L ELDRED 5623 SUNNYVIEW RD SALEM, OR 97305 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.251	CLINTON D ROHRBACHER 4000 BROOKLYN LANE EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.252	CLINTON MARSHALL & 2130 E 1ST ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.253	CLYNN E. NUTT 8307 WASHOE ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. Name	Case number (if known)
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3.254	Nonpriority creditor's name and mailing address CMP Family LLC c/o A. Shelby Easterly, III 142 Del Norte Avenue Denham Springs, LA 70726 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.255	Nonpriority creditor's name and mailing address COASTAL FLOW GAS MEASUREMENT PO BOX 58965 HOUSTON, TX 77258-8965 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,600.30
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3.256	Nonpriority creditor's name and mailing address COCKRELL OIL CORPORATION 1000 MAIN STREET HOUSTON, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.257	Nonpriority creditor's name and mailing address CODI S LLOYD PO BOX 397 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.258	Nonpriority creditor's name and mailing address CODY D STEPHENS 907 GOLDEN AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.259	Nonpriority creditor's name and mailing address CODY L GARDNER 2144 LOCUST WAY FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.260	Nonpriority creditor's name and mailing address Columbia Gulf Transmission L L C c/o James Michael Fussell , Jr Ottinger Hebert P O Drawer 52606 Lafayette, LA 70505-2606 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
3.261	High Mesa, Inc. COMPROMISE AGEEMENT n/a n/a, n/a n/a Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.262	COMPROMISE AGREEMENT FOR STATE LEASE 340 n/a n/a, n/a n/a Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.263	Condor Petroleum Corp c/o Jamie D Rhymes Liskow & Lewis P O Box 52008 O C S Lafayette, LA 70505 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.264	CONIG 818 INVESTMENTS LLC 2929 Allen Parkway # 4100 Houston,, TX 77019 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.265	Conley P Smith L L C c/o Jason Edward Wilson Galloway Johnson et al 328 Settlers Trace Blvd Lafayette, LA 70508 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.266	Conley P Smith Operating Co c/o Jason Edward Wilson Galloway Johnson et al 328 Settlers Trace Blvd Lafayette, LA 70508 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.267	ConocoPhillips Company 501 Louisiana Avenue Baton Rouge, LA 70802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.268	Nonpriority creditor's name and mailing address ConocoPhillips Company c/o Deborah D Kuchle Kuchler Polk Weiner, LLC 1615 Poydras St. Suite 1300 New Orleans, LA 70112 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.269	Nonpriority creditor's name and mailing address CONSUELO VARGAS 2056 SPRING CREEK DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.270	Nonpriority creditor's name and mailing address COOKIE ATKINS 8036 ESTATES BLVD FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.271	Nonpriority creditor's name and mailing address CORI L SMITH 2746 SPRUCE DR FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.272	Nonpriority creditor's name and mailing address COX COMMUNICATIONS-BUSINESS PO BOX 919243 DALLAS, TX 75391-9243 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,540.00
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3.273	Nonpriority creditor's name and mailing address Cox Operating, L.L.C. Baker Donelson Bearman Caldwell & Berkow 201 St. Charles Ave. Suite 3600 New Orleans, LA 70170 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.274	Nonpriority creditor's name and mailing address CRAIG & IDA BEAL LIVING TRUST 7288 HILLVIEW ROAD EMMETT, ID 83617 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
3.275	High Mesa, Inc. Nonpriority creditor's name and mailing address CREAMER DOZER SERVICE INC 1910 SOUTH BLVD BREWTON, AL 36426 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$371.70
3.276	Nonpriority creditor's name and mailing address CROFT PRODUCTION SYSTEMS INC 19230 FM 442 ROAD NEEDVILLE, TX 77461 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,570.35
3.277	Nonpriority creditor's name and mailing address Croft Production Systems, Inc (CROFT) 19230 FM 442 Needville Needville, TX 77461 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.278	Nonpriority creditor's name and mailing address CRYSTAL RUSSELL 1510 NW 26TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Royalty Interest Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.279	Nonpriority creditor's name and mailing address CSC PO BOX 133697 PHILADELPHIA, PA 19101-3397 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$18,828.45
3.280	Nonpriority creditor's name and mailing address CTM 2005, LTD 3312 Bammel Lane Houston, TX 77098 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Debtor resigned as operator. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.281	Nonpriority creditor's name and mailing address CTMI LLC 12221 MERIT SUITE 1200 DALLAS, TX 75251 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$2,350.00

Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.282	Nonpriority creditor's name and mailing address Curry County Assessor's Office 94235 W Moore St #221 Gold Beach, OR 97444 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.283	Nonpriority creditor's name and mailing address CURT D STOWE & 1009 BRAEBURN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.284	Nonpriority creditor's name and mailing address CURT KAMO AND KATHLEEN M KAMO 3463 SW 2ND AVENUE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.285	Nonpriority creditor's name and mailing address CYNTHIA ANN REMINGTON PO BOX 550 ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.286	Nonpriority creditor's name and mailing address CYPRESS FIRE & SAFETY LLC 10725 SIDNEY GAUTREAUX RD ABBEVILLE, LA 70510 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,507.48
3.287	Nonpriority creditor's name and mailing address D & M DRILLING FLUIDS INC PO BOX 579 JAY, FL 32565 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$3,577.00
3.288	Nonpriority creditor's name and mailing address D MARC HAWS & KAREN I HAWS 893 EAST FOURTH CT KUNA, ID 83634 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	High Mesa, Inc.	Case number (if known)
Name		
3.289	Nonpriority creditor's name and mailing address DAGATES MARINE INC 1128 BARROW STREET HOUMA, LA 70360 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10,649.65 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.290	Nonpriority creditor's name and mailing address DALE & MARY ANN MARTIN TRUST 227 EVERGREEN RD ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.291	Nonpriority creditor's name and mailing address DALE GENE MILLER 2929 NW 4TH AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.292	Nonpriority creditor's name and mailing address DALE J LACRONE PO BOX 63 NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.293	Nonpriority creditor's name and mailing address DALE SWANSON & 3495 BEACON AVENUE EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.294	Nonpriority creditor's name and mailing address DAMEON EPPERSON 6519 SE CENTER ST PORTLAND, OR 97206 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.295	Nonpriority creditor's name and mailing address DANE HULBERT & DANETTE HULBERT 3285 WEST HIGHWAY 52 EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.296	Nonpriority creditor's name and mailing address DANIEL D. WOLF 2837 NW 4TH AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.297	Nonpriority creditor's name and mailing address DANIEL DEAN ROLAND 8620 RABY LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.298	Nonpriority creditor's name and mailing address DANIEL DUANE FERRY 8500 WASHOE RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.299	Nonpriority creditor's name and mailing address DANIEL E HALE 731 N HAYDEN MEADOWS DRIVE PORTLAND, OR 97217 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.300	Nonpriority creditor's name and mailing address DANIEL G DOERSCH & 8100 DUTCH LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.301	Nonpriority creditor's name and mailing address DANIEL L GREEN PO BOX 730 NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.302	Nonpriority creditor's name and mailing address DANIEL R VANDERPOOL & 925 FAIRVIEW AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.303	Nonpriority creditor's name and mailing address DANIEL WEAVER 9553 W HIGHWAY 52 EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.304	Nonpriority creditor's name and mailing address DANNY A LITTLE & 1401 JESSICA AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.305	Nonpriority creditor's name and mailing address DANNY L SQUIBB 102 NE 14TH DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.306	Nonpriority creditor's name and mailing address DANNY P ERSKINE 7699 ELMORE RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.307	Nonpriority creditor's name and mailing address DANNY R CLARICH 1590 POPLAR AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.308	Nonpriority creditor's name and mailing address DANNY SMITH & 8305 WASHOE RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.309	Nonpriority creditor's name and mailing address DANOS LLC 3878 WEST MAIN STREET GRAY, LA 70359 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$430,017.47

Debtor	High Mesa, Inc.	Case number (if known)
Name		
3.310	Nonpriority creditor's name and mailing address DARIN L SIPES & 8520 RABY LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.311	Nonpriority creditor's name and mailing address DARLEEN M WALKER 1626 OAK AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.312	Nonpriority creditor's name and mailing address DARLENE K STONE 2738 SPRUCE DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.313	Nonpriority creditor's name and mailing address DARLENE M RAMBO 7750 RICHEY ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.314	Nonpriority creditor's name and mailing address DARREL & LORAIN SAWYER LVG TR 1301 JESSICA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.315	Nonpriority creditor's name and mailing address DARRELL A CARR 8148 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.316	Nonpriority creditor's name and mailing address DARYL WESLEY ELDRED 5770 CUSTER ROAD NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.317	Nonpriority creditor's name and mailing address DASHANNA M CURETON 815 NORTH WEST 3RD STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.318	Nonpriority creditor's name and mailing address DAVE A FELTY SR & 8271 WASHOE ROAD PAYETTE, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.319	Nonpriority creditor's name and mailing address DAVID C DERRICK & 2615 APPLEWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.320	Nonpriority creditor's name and mailing address DAVID C RONK & 3440 H ST EUREKA, CA 95503-5361 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.321	Nonpriority creditor's name and mailing address DAVID D GOSS & 1937 TABLE ROCK RD BOISE, ID 83712 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.322	Nonpriority creditor's name and mailing address DAVID E CARPENTER & 2254 E 1ST ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.323	Nonpriority creditor's name and mailing address DAVID E JENNINGS & 2274 NE 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc.	Case number (if known)
Name		
3.324	Nonpriority creditor's name and mailing address DAVID E KOEPPE SURVIVORS TRST 1583 NW 26TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.325	Nonpriority creditor's name and mailing address DAVID G BIEKER & 7400 CUSTER ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.326	Nonpriority creditor's name and mailing address DAVID G LIRGG & 7860 RICHEY ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.327	Nonpriority creditor's name and mailing address DAVID G LOCKNER 2141 LOCUST WAY FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.328	Nonpriority creditor's name and mailing address DAVID H JEFFRIES 10839 SILVER SAGE LN PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.329	Nonpriority creditor's name and mailing address DAVID H RICHMOND 8531 SHANNON RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.330	Nonpriority creditor's name and mailing address DAVID HAWK Confidential Confidential Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.331	Nonpriority creditor's name and mailing address DAVID J BENNETT & 1302 JESSICA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.332	Nonpriority creditor's name and mailing address DAVID K BURT AND MAURINE BURT PO BOX 804 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.333	Nonpriority creditor's name and mailing address DAVID K HAIDLE & 809 N WHITLEY DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.334	Nonpriority creditor's name and mailing address DAVID K MARTIN 2617 APPLEWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.335	Nonpriority creditor's name and mailing address DAVID L HOPKINS & 4720 KIMBALL ROAD ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.336	Nonpriority creditor's name and mailing address DAVID M SMITH 18307 FERN TRAIL CT HOUSTON, TX 77084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.337	Nonpriority creditor's name and mailing address DAVID OBRAY & PO BOX 2982 HAYDEN, ID 83835 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. Name	Case number (if known)
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3.338	Nonpriority creditor's name and mailing address DAVID P. LABIT C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.339	Nonpriority creditor's name and mailing address DAVID R & LINDA J SMALLWOOD 8633 SHANNON RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.340	Nonpriority creditor's name and mailing address DAVID R PEARCY II 307 NW 9TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.341	Nonpriority creditor's name and mailing address DAVID RAYMOND AUXIER & 4750 LITTLE WILLOW RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.342	Nonpriority creditor's name and mailing address DAVID S GRAVES 2284 NE 16TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.343	Nonpriority creditor's name and mailing address DAVID STRODA 410 NE 13TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.344	Nonpriority creditor's name and mailing address DAVID T TRIGUEIRO 1295 W 7TH ST APT 14 WEISER, ID 83672 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
High Mesa, Inc.		
3.345	Nonpriority creditor's name and mailing address DAVID THOMAS GRANT & 7902 RICHEY RD FRUITLAND, ID 83619-3571 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.346	Nonpriority creditor's name and mailing address DAVID W BRUNEEL 1215 LITTLE ROCK RD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.347	Nonpriority creditor's name and mailing address DAVID W HOLM & SHARYL L HOLM 3223 NW 3RD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.348	Nonpriority creditor's name and mailing address DAVIS PETROLEUM CORP 1330 Post Oak Blvd., Suite 600 Houston, TX 77056 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.349	Nonpriority creditor's name and mailing address DEAN AND KAY CARDIN TRUST 4911 SAND HOLLOW RD NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.350	Nonpriority creditor's name and mailing address DEAN ENTERPRISES, INC 17380 Highway 101 Iowa, LA 70647 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.351	Nonpriority creditor's name and mailing address DEAN J COON & 206 NW 9TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.352	Nonpriority creditor's name and mailing address DEBBY SU BLATCHLEY 8488 WASHOE RD PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.353	Nonpriority creditor's name and mailing address DEBRA B. CHAISSON C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.354	Nonpriority creditor's name and mailing address DEBRA DIANE SPIDELL 885 NW ESTATE DRIVE SEAL ROCK, OR 97376 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.355	Nonpriority creditor's name and mailing address DEBRA M. OWENS C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.356	Nonpriority creditor's name and mailing address Deep Wilcox Oil & Gas and Hankerson Oil LLC c/o Lewis Brisbois Bisgaard & Smith LLPH 24 Greenway Plaza, Suite 1400 Houston, TX 77046 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$850,000.00
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3.357	Nonpriority creditor's name and mailing address DEL REED BERGESON & PO BOX 949 FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.358	Nonpriority creditor's name and mailing address DELL RAY WINEGAR 5350 SOUTH WHITLEY DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.359	Nonpriority creditor's name and mailing address DELORES MCDANIEL 1577 POPLAR AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.360	Nonpriority creditor's name and mailing address DELOY MECHAM & 3200 JACKSON AVE EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.361	Nonpriority creditor's name and mailing address DENBURY ONSHORE, LLC 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.362	Nonpriority creditor's name and mailing address DENISE R RUDD PO BOX 131 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.363	Nonpriority creditor's name and mailing address DENNIS D WHALEN 650 SYRINGA SPRINGS DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.364	Nonpriority creditor's name and mailing address DENNIS DESHIELDS & 845 RAY ST PEA RIDGE, AR 72751 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.365	Nonpriority creditor's name and mailing address DENNIS E STONE 7895 N OREGON AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
3.366	High Mesa, Inc. Nonpriority creditor's name and mailing address DENNIS EVANS & 15178 GALLOWAY ROAD CALDWELL, ID 83607 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.367	Nonpriority creditor's name and mailing address DENNIS J HERWY & 3700 3RD LANE EAST PARMA, ID 83660 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.368	Nonpriority creditor's name and mailing address DENNIS K UJIIYE & 1505 NW 2ND AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.369	Nonpriority creditor's name and mailing address DENNIS L PRUETT & 27262 USTICK ROAD WILDER, ID 83676 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.370	Nonpriority creditor's name and mailing address DENNIS NEWMAN & 8043 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.371	Nonpriority creditor's name and mailing address Denovo Oil & Gas Inc c/o Jamie D Rhymes Liskow & Lewis P O Box 52008 O C S Lafayette, LA 70505 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.372	Nonpriority creditor's name and mailing address DEPARTMENT OF INTERIOR-MMS 15156 EAST CA LA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$0.00

Debtor	Name	Case number (if known)
3.373	High Mesa, Inc. Department of Natural Resources P.O. Box 94396 Baton Rouge, LA 70804 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.374	Nonpriority creditor's name and mailing address DEPARTMENT OF THE INTERIOR OCS-G 4486 MA LA Date(s) debt was incurred ____ Last 4 digits of account number ____	\$0.00 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.375	Nonpriority creditor's name and mailing address DERALD H MARTI & 901 BOBWHITE ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.376	Nonpriority creditor's name and mailing address DERRELL C CHILDERS 1808 7TH AVE N PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.377	Nonpriority creditor's name and mailing address DERRICK VANDEBERG 2701 N ALDER DR # 0 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.378	Nonpriority creditor's name and mailing address DESERT CANYON RANCH LLC 1990 E BLACK CANYON HIGHWAY EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.379	Nonpriority creditor's name and mailing address DEVON ENERGY CORPORATION 333 W SHERIDAN AVE OKLAHOMA CITY, OK 73102 Date(s) debt was incurred ____ Last 4 digits of account number ____	\$6,973.00 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.380	Nonpriority creditor's name and mailing address DEVON ENERGY PRODUCTION COMPANY LP 5615 CORPORATE BLVD, STE 400B BATON ROUGE, LA 70808 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.381	Nonpriority creditor's name and mailing address DIANA & JOSEPH INGALLS TRUST 8590 SHANNON RD PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.382	Nonpriority creditor's name and mailing address DIANA CLOVER 7884 RICHEY ROAD FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.383	Nonpriority creditor's name and mailing address DIANE BERGERON C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.384	Nonpriority creditor's name and mailing address DIANE G. GORDON C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.385	Nonpriority creditor's name and mailing address DIANE KAY ODELL AS TTEE DIANE ODELL PO BOX 1090 FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.386	Nonpriority creditor's name and mailing address DIANE M KASSAB 1659 PRAIRIE GROVE DRIVE HOUSTON, TX 77077 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,841.00
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Debtor	Name	Case number (if known)
3.387	High Mesa, Inc. Nonpriority creditor's name and mailing address DIRECTV PO BOX 105249 ATLANTA, GA 30348-5249 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$63.97
3.388	Nonpriority creditor's name and mailing address DIVERSIFIED RESOURCES INC 3500 MASSILLON ROAD UNIONTOWN, OH 44685 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.389	Nonpriority creditor's name and mailing address DIXIE RICE AGRICULTURAL CORPORATION, INC C/O MUNSCH, HARDT, KOPF & HARR, P.C. 3800 LINCOLN PLAZA 500 NORTH AKARD DALLAS, TX 75201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.390	Nonpriority creditor's name and mailing address DJS PROPERTIES LP PO DRAWER 27 BOISE, ID 83707-0027 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Royalty Interest Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.391	Nonpriority creditor's name and mailing address DNOW PO BOX 200822 DALLAS, TX 75320-0822 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$11,729.83
3.392	Nonpriority creditor's name and mailing address DOLORES HERRERA 1009 JONATHAN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Royalty Interest Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.393	Nonpriority creditor's name and mailing address DOLORES L SOUTHARD 1308 W FRANKLIN STREET BOISE, ID 83702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Royalty Interest Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.394	Nonpriority creditor's name and mailing address DON & ANNE GROSS TRUST DTD 1015 VICTORIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.395	Nonpriority creditor's name and mailing address DON GROSS 2206 NORTH WHITLEY DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.396	Nonpriority creditor's name and mailing address DONALD A HAAGENSEN & 804 NW 24TH ST SUITE A FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.397	Nonpriority creditor's name and mailing address DONALD C SAVAGE & 1810 N VISTA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.398	Nonpriority creditor's name and mailing address DONALD G PREUSS & 3911 KINGSTON AVENUE CALDWELL, ID 83605 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.399	Nonpriority creditor's name and mailing address DONALD L. DRESSEN 2742 NW 4TH AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.400	Nonpriority creditor's name and mailing address DONALD M BAINES AND 2670 NW 4TH AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
3.401	High Mesa, Inc. Nonpriority creditor's name and mailing address DONALD NELSON & 141 BEECH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.402	Nonpriority creditor's name and mailing address DONALD PAYNE & 9818 SOUTHBANK RD ROSEBURG, OR 97470 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.403	Nonpriority creditor's name and mailing address DONALD REED & JANET REED 1882 W CREEK CT NAMPA, ID 83686 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.404	Nonpriority creditor's name and mailing address DONALD S MORRISON & 2605 ALDER DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.405	Nonpriority creditor's name and mailing address DONNA BATT 7763 ELMORE ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.406	Nonpriority creditor's name and mailing address DONNA L BURZOTA TRUST 2600 APPLEWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.407	Nonpriority creditor's name and mailing address DONNA MAE HUME 910 JONATHAN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.408	Nonpriority creditor's name and mailing address DONNA MCKINLEY C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.409	Nonpriority creditor's name and mailing address DONNETTE ANN REINS 9615 SUGAR HILL #B AUSTIN, TX 78748 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.410	Nonpriority creditor's name and mailing address DONOHIO INC 1033 ALAMEDA DR ONTARIO, OR 97914 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.411	Nonpriority creditor's name and mailing address DORA J LEICHSENDRING 9211 34TH STREET EAST EDGEWOOD, WA 98371 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.412	Nonpriority creditor's name and mailing address DORA N SEEQUIST 916 VICTORIA AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.413	Nonpriority creditor's name and mailing address DORIS MASHBURN C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.414	Nonpriority creditor's name and mailing address DOROTHY G WEST 108 COUNTRY LANE LOOP PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.415	Nonpriority creditor's name and mailing address DOROTHY HILEMAN 1705 NORTH ALLEN AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.416	Nonpriority creditor's name and mailing address DOROTHY JEAN BRUCE 27213 LANA LANE CONROE, TX 77385 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.417	Nonpriority creditor's name and mailing address DOTSON BABCOCK & SCOFIELD 401 McKinney St #1900 Houston, TX 77010 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.418	Nonpriority creditor's name and mailing address DOUG DAWS PO BOX 206 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.419	Nonpriority creditor's name and mailing address DOUGLAS A. WHITE & 5866 HIGHWAY 30 SOUTH NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.420	Nonpriority creditor's name and mailing address DOUGLAS D MOSCRIP & 7923 RICHEY ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.421	Nonpriority creditor's name and mailing address DOUGLAS DUANE TAYLOR 4916 N PIERCE PARK LN BOISE, ID 83714 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.422	Nonpriority creditor's name and mailing address DOUGLAS E SCARLETT & 7300 DENVER FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.423	Nonpriority creditor's name and mailing address DOUGLAS G DEARDORFF & 310 N UTAH AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.424	Nonpriority creditor's name and mailing address DOUGLAS M KIMBALL & 2169 ALPINE CREEK DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.425	Nonpriority creditor's name and mailing address DOUGLAS S DORSING PO BOX 1005 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.426	Nonpriority creditor's name and mailing address DOUGLAS S OLSON & 8820 SOLTERBECK LN PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.427	Nonpriority creditor's name and mailing address DUANE E BRIGHTWELL & 910 VICTORIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.428	Nonpriority creditor's name and mailing address DUANE L COFFEY SR Confidential Confidential Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known)
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3.429	Nonpriority creditor's name and mailing address DUSTIN MCDANIEL & 4797 NW 1ST AVE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.430	Nonpriority creditor's name and mailing address DWAINE ANTHONY TESNOHLIDEK & 4505 SOUTH WHITLEY DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.431	Nonpriority creditor's name and mailing address E P Energy E & P Co L P c/o Richard Dean McConnell , Jr Kean Miller P O Box 3513 Baton Rouge, LA 70821 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.432	Nonpriority creditor's name and mailing address EAGLE FORD HUNTER RESOURCES 777 POST OAK BLVD STE 650 Houston, TX 77056 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.433	Nonpriority creditor's name and mailing address EAGLE ISLAND RANCH INC 7270 N TREE HAVEN PL MERIDIAN, ID 83646 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.434	Nonpriority creditor's name and mailing address EARL D BROWNE 8120 UPPER AVE EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.435	Nonpriority creditor's name and mailing address EARL WAYNE COLSON 8034 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.436	Nonpriority creditor's name and mailing address EARLENE ANNETTE WALSTON 2310 SHAMROCK CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.437	Nonpriority creditor's name and mailing address EBR PROPERTIES II 245 Commerce Green Boulevard Sugarland, TX 77478 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.438	Nonpriority creditor's name and mailing address EDUARDO FERRERIA & 2900 SW 3RD AVENUE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.439	Nonpriority creditor's name and mailing address ELDRED FARMS INC &DARYL ELDRED 5770 CUSTER RD. NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.440	Nonpriority creditor's name and mailing address ELISABETH VENEGAS 1006 GOLDEN AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.441	Nonpriority creditor's name and mailing address ELIZABETH A HOLSINGER 3271 WEST SCENIC DRIVE BOISE, ID 83703-4718 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.442	Nonpriority creditor's name and mailing address ELIZABETH C ALLENDER 2161 ALPINE CREEK DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.443	Nonpriority creditor's name and mailing address ELIZABETH COLEMAN 15021 KATY FREEWAY SUITE 400 HOUSTON, TX 77094 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.444	Nonpriority creditor's name and mailing address ELIZABETH MONCADA 304 NE 12TH DR FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.445	Nonpriority creditor's name and mailing address ELLA JOSEPHSON TRUST 2612 WINESAP AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.446	Nonpriority creditor's name and mailing address ELTON J HUNSUCKER & 1904 HEITZ AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.447	Nonpriority creditor's name and mailing address ELVIN DEWITT LIVING TRUST 5025 HILLVIEW ROAD EMMETT, ID 83617 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.448	Nonpriority creditor's name and mailing address EMILY ELLEN WOODALL 2203 LAURIE DARLIN CT CONROE, TX 77384-2513 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,666.67
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3.449	Nonpriority creditor's name and mailing address EMMETT C ROSENKRANCE & 2152 MAPLE CT FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.450	Nonpriority creditor's name and mailing address EMMETT L MAINE & 3760 HIGHWAY 95 PARMA, ID 83660 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.451	Nonpriority creditor's name and mailing address Enable Oklahoma Intrastate Transmission c/o Thomas D Gildersleeve Taylor Porter et al P O Box 2471 Baton Rouge, LA 70821 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.452	Nonpriority creditor's name and mailing address ENDEAVOR NATURAL GAS 1201 Louisiana St # 3350 Houston, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.453	Nonpriority creditor's name and mailing address Energen Resources Corporation c/o Joe B Norman Liskow & Lewis 701 Poydras St. Suite 5000 New Orleans, LA 70139-5099 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.454	Nonpriority creditor's name and mailing address ENERGY TRANSPORT LLC PO BOX 309 ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,428.96
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3.455	Nonpriority creditor's name and mailing address ENERGY TUBULARS INC 3010 OLD RANCH PARKWAY SUITE 400 SEAL BEACH, CA 90740 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,309.31
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3.456	Nonpriority creditor's name and mailing address EnergyQuest II L L C c/o Terrence K Knister Gordon Arata et al 201 St Charles Ave Ste 4000 New Orleans, LA 70170-4000 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.457	Nonpriority creditor's name and mailing address ENERVEST 1001 Fannin St #800 Houston, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.458	Nonpriority creditor's name and mailing address ENI OIL & GAS INC. 909 Poydras Street Suite 361 New Orleans, LA 70112 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.459	Nonpriority creditor's name and mailing address ENERGY UTILITY HOLDING CO LLC PO BOX 8103 BATON ROUGE, LA 70891-8103 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$239.38
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3.460	Nonpriority creditor's name and mailing address Environmental Protection Agency 10625 Fallstone Rd Houston, TX 77099 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Asset Retirement Obligation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,919,815.00
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3.461	Nonpriority creditor's name and mailing address EOG RESOURCES INC PO BOX 840319 DALLAS, TX 75284 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$65,157.91
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3.462	Nonpriority creditor's name and mailing address ERIC GARMAN 1004 GOLDEN AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.463	Nonpriority creditor's name and mailing address ERIC KYLE P.O. BOX 15033 BOISE, ID 83715 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.464	Nonpriority creditor's name and mailing address ERIC MITCHELL & 3015 NW 3RD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.465	Nonpriority creditor's name and mailing address ERIC P. BERGERON C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.466	Nonpriority creditor's name and mailing address ERMA LOUISE BEAGLEY 7230 BOISE ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.467	Nonpriority creditor's name and mailing address ERNEST A GENTRY & 705 NW 3RD DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.468	Nonpriority creditor's name and mailing address ERNEST E. EILERS 4623 SE 1ST AVENUE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.469	Nonpriority creditor's name and mailing address ERNEST G ALIOTO & 1500 NW 6TH AVENUE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.470	Nonpriority creditor's name and mailing address ERNEST NEILL 909 VICTORIA AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
High Mesa, Inc.		
3.471	Nonpriority creditor's name and mailing address ERNEST R ALGER 208 NE 12TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.472	Nonpriority creditor's name and mailing address ERNESTINE GERALDINE BUTLER 2600 GOLDEN AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.473	Nonpriority creditor's name and mailing address ERNESTO HERRERA PO BOX 842 PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.474	Nonpriority creditor's name and mailing address ERNIE L DEACON & 4112 SUNNYRIDGE ROAD NAMPA, ID 83686 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.475	Nonpriority creditor's name and mailing address ESSENJAY EXPLORATION INC 500 North Water Street Corpus Christi, TX 78401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.476	Nonpriority creditor's name and mailing address ESTATE OF CLATON W CONNER 2140 FAIRVIEW ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.477	Nonpriority creditor's name and mailing address EUSTOLIA HARRISON 8028 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.478	Nonpriority creditor's name and mailing address EVALINE HALL 8492 WASHOE ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.479	Nonpriority creditor's name and mailing address EVAN TAYLOR 890 E OLD SAYBROOK LN BOISE, ID 83706 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.480	Nonpriority creditor's name and mailing address EVANGELINE NATURAL RESOURCES LLC 323 TWIN RIVER DRIVE COVINGTON, LA 70433-8505 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.481	Nonpriority creditor's name and mailing address EVANS FAMILY TRUST 26281 FREEZEOUT ROAD CALDWELL, ID 83607 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.482	Nonpriority creditor's name and mailing address EVERET L HIATT & 3394 ARCADIA BLVD NYSSA, OR 97913 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.483	Nonpriority creditor's name and mailing address EVERGREEN WORKING CAPITAL LLC PO BOX 3729 HOUMA, LA 70361-3729 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$526.85
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3.484	Nonpriority creditor's name and mailing address EXCEL EQUIPMENT COMPANY INC PO BOX 191048 BOISE, ID 83719-1048 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,540.00
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Debtor	Name	Case number (if known)
3.485	High Mesa, Inc. Nonpriority creditor's name and mailing address Exchange Oil & Gas Corp c/o Robert B McNeal Liskow & Lewis 701 Poydras St Ste 5000 New Orleans, LA 70139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.486	Exxon Mobil Corp c/o Robert B McNeal Liskow & Lewis 701 Poydras St Ste 5000 New Orleans, LA 70139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.487	Exxon Mobil Corporation c/o Mark McNamara Liskow & Lewis 701 Poydras Street, Suite 5000 New Orleans, LA 70139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,650,000.00
3.488	F WARREN & MARGARET C CARNEFIX 517 SW 2ND ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.489	FAIRWAY ENERGY LLC 1601 NW EXPRESSWAY SUITE 777 OKLAHOMA CITY, OK 73118 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.490	FALLON ENTERPRISES, INC 1340 HARTMAN RD LIVERMORE, CA 94550 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.491	FAM TRST OF BILL & DIANE ODELL PO BOX 1090 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.492	Nonpriority creditor's name and mailing address FARMERS COOP IRR CO 102 N MAIN ST PAYETTE, ID 83661-2522 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.493	Nonpriority creditor's name and mailing address FEDERICO MEDINA & 1006 BRAEBURN STREET FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.494	Nonpriority creditor's name and mailing address FELIPE LOPEZ & 2809 NW 4TH AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.495	Nonpriority creditor's name and mailing address FERN MARIE ROBINETTE AKA 1850 UEHLIN ROAD PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.496	Nonpriority creditor's name and mailing address FIELDWOOD ENERGY LLC 2000 W SAM HOUSTON PKWY SOUTH SUITE 1200 HOUSTON, TX 77042 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$62,735.29
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3.497	Nonpriority creditor's name and mailing address Fieldwood S D Offshore L L C c/o Douglas C Longman , Jr Jones Walker P O Drawer 3408 Lafayette, LA 70502-3408 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Asset Retirement Obligation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.498	Nonpriority creditor's name and mailing address FIRST INSURANCE FUNDING CORP PO BOX 7000 CAROL STREAM, IL 60197-7000 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,864.51
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.499	Nonpriority creditor's name and mailing address Fisher RE LLC 4937 SE 1ST AVE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.500	Nonpriority creditor's name and mailing address FISHER'S TECHNOLOGY 575 E 42 STREET BOISE, ID 83714 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$390.30
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3.501	Nonpriority creditor's name and mailing address Fishman, Haygood, Phelps, Walmsley, Will 201 St Charles Ave Suite 4600 New Orleans, LA 70171 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.502	Nonpriority creditor's name and mailing address FLOQUIP INC PO BOX 80156 LAFAYETTE, LA 70598 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,875.05
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3.503	Nonpriority creditor's name and mailing address FLORA M STEELE 1314 NW 19TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.504	Nonpriority creditor's name and mailing address Florida Department of Environ. Protect. 3900 Commonwealth Boulevard Tallahassee, FL 32399 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.505	Nonpriority creditor's name and mailing address Florida Department of Revenue 1415 N Loop W # 1190 Houston, TX 77008 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc.	Case number (if known)	
	Name		
3.506	Nonpriority creditor's name and mailing address Florida Department of State The Centre of Tallahassee 2415 N Monroe St Ste 810 Tallahassee, FL 32303 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.507	Nonpriority creditor's name and mailing address FLORIDA G BOWKER 2503 APPLEWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.508	Nonpriority creditor's name and mailing address FLOYD E. SAGELY PROPERTIES 3017 S 70th St B Fort Smith, AR 72903 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.509	Nonpriority creditor's name and mailing address FLOYD FRENCH P0 BOX 534 NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.510	Nonpriority creditor's name and mailing address FLOYD RUFFIN C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.511	Nonpriority creditor's name and mailing address FORTNEY WELLS, HARRISON COUNTY, WEST VIR 16600 Park Row, Suite 158 HOUSTON, TX 77084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.512	Nonpriority creditor's name and mailing address FORTUNATO HERRERA & 8265 WASHOE RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.513	Nonpriority creditor's name and mailing address FRANCES BURNETT 4260 STATE ROAD 275 BROADVIEW, NM 88112 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.514	Nonpriority creditor's name and mailing address FRANCES L MCCONNELL PO BOX 1534 CARLIN, NV 89822 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.515	Nonpriority creditor's name and mailing address FRANCIS C FLOREZ 1207 NW 24TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.516	Nonpriority creditor's name and mailing address FRANK BLEVINS & 304 N UTAH FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.517	Nonpriority creditor's name and mailing address FRANK CHIODI PO BOX 988 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.518	Nonpriority creditor's name and mailing address FRANK DAVID STEPHENS 4950 LITTLE WILLOW ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.519	Nonpriority creditor's name and mailing address FRANK E BRIGGS 1709 NORTH ALLEN AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.520	Nonpriority creditor's name and mailing address FRANK J CUNNINGHAM & 203 NW 9TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.521	Nonpriority creditor's name and mailing address FRANK JAMES UNKNOWN LA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.522	Nonpriority creditor's name and mailing address FRANK L SMITH 3770 VAN DEUSEN RD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.523	Nonpriority creditor's name and mailing address FRANK W WALCZYK PO BOX 55472 NORTH POLE, AK 99705 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.524	Nonpriority creditor's name and mailing address FRANKIE D LARSEN 7510 CUSTER RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.525	Nonpriority creditor's name and mailing address FRANKLIN D. TEUNISSEN & 3749 SW 3RD AVENUE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.526	Nonpriority creditor's name and mailing address FRAZER C PETERSON AND LAWS OF ST OF IDAHO DTD 12/17/2014 2075 KILLEBREW DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.527	Nonpriority creditor's name and mailing address FREDERICK A HALLBERG & 7845 ELMORE ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.528	Nonpriority creditor's name and mailing address FREDERICK F RICHARDS JR 3 CUMBERLAND PLACE RICHARDSON, TX 75080 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.529	Nonpriority creditor's name and mailing address Freeport McMoRan Oil & Gas L L C c/o Carl David Rosenblum Jones Walker 201 St Charles Ave Ste 5100 New Orleans, LA 70170 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.530	Nonpriority creditor's name and mailing address FTI CONSULTING INC PO BOX 418005 BOSTON, MA 02241-8005 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$42,197.00
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3.531	Nonpriority creditor's name and mailing address FTI PLATT SPARKS 925-A Capital of Texas Highway, South Austin, TX 78746 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.532	Nonpriority creditor's name and mailing address FUELMAN FLEET PO BOX 70887 CHARLOTTE, NC 28272-0887 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$402.25
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3.533	Nonpriority creditor's name and mailing address FUTURE ROYALTIES INC 6561 State Highway 59 S Bowie, TX 76230 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.534	Nonpriority creditor's name and mailing address G & L WELL SERVICE INC PO BOX 2673 LAFAYETTE, LA 70502 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,480.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.535	Nonpriority creditor's name and mailing address G&G SURVEY AND CONSULTING INC 1418 EMMOTT DR RICHMOND, TX 77469 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,950.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.536	Nonpriority creditor's name and mailing address GAIL DELBRIDGE & 2150 EAST 1ST STREET FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.537	Nonpriority creditor's name and mailing address GAIL L DAVIS 506 WEST 2ND NORTH MOUNTAIN HOME, ID 83647 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.538	Nonpriority creditor's name and mailing address Gaither Petroleum Corporation 16600 Park Row Houston, TX 77084 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.539	Nonpriority creditor's name and mailing address GALVESTON COUNTY TAX ASSESSOR 722 MOODY GALVESTON, TX 77550 Date(s) debt was incurred <u>2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,626.26 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.540	Nonpriority creditor's name and mailing address GARMAN & SONS INC 8523 WASHOE ROAD PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.541	Nonpriority creditor's name and mailing address GARRED AUTOMOTIVE LLC PO BOX 446 NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$14,925.52 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.542	Nonpriority creditor's name and mailing address GARRETT R DAUDT & 8513 HWY 95 PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.543	Nonpriority creditor's name and mailing address GARRY C. SEAWARD & 3595 NW 4TH AVE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.544	Nonpriority creditor's name and mailing address GARY A SMITH TRUST 2017 THORNBURY COURT RENO, NV 89523 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.545	Nonpriority creditor's name and mailing address GARY C WILLIAMSON & 2288 NE 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.546	Nonpriority creditor's name and mailing address GARY D OWEN 1488 POPLAR AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.547	Nonpriority creditor's name and mailing address GARY E BOURQUIN & 8800 MICKELSON LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. Name	Case number (if known)
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3.548	Nonpriority creditor's name and mailing address GARY F BROWN & 8210 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.549	Nonpriority creditor's name and mailing address GARY GARDNER 1010 JONATHAN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.550	Nonpriority creditor's name and mailing address GARY HALE & 2857 NW 4TH AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.551	Nonpriority creditor's name and mailing address GARY K FLOYD & 297 ASH LOOP FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.552	Nonpriority creditor's name and mailing address GARY L DUFF & 2375 KILLEBREW DRIVE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.553	Nonpriority creditor's name and mailing address GARY L WALLACE & 1808 ALLEN AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.554	Nonpriority creditor's name and mailing address Gary Production Company National Registered Agents, Inc. 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.555	Nonpriority creditor's name and mailing address GARY R BELKNAP 2735 SPRUCE DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.556	Nonpriority creditor's name and mailing address GAUBERT OIL COMPANY INC PO BOX 310 THIBODAUX, LA 70302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,129.69
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3.557	Nonpriority creditor's name and mailing address Gem County Treasurer/Tax Collector 415 E. Main Emmett, ID 83617-3096 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.558	Nonpriority creditor's name and mailing address GENE A CAPPS & 703 WARNER AVE LEWISTON, ID 83501 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.559	Nonpriority creditor's name and mailing address GENEVA A WELCH & PO BOX 326 NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.560	Nonpriority creditor's name and mailing address GEORGE ARTHUR RICHARDS 3876 RIDGELAKE COURT ADDISON, TX 75001-7924 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.561	Nonpriority creditor's name and mailing address GEORGE E BRIGGS & JANET B PO BOX 152 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.562	Nonpriority creditor's name and mailing address GEORGE G QUENZER A/K/A 7760 FOOTHILL ROAD MIDDLETON, ID 83644 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.563	Nonpriority creditor's name and mailing address GEORGE T THEBO & 1208 TARA CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.564	Nonpriority creditor's name and mailing address GEORGE W BACUS 905 NW 24TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.565	Nonpriority creditor's name and mailing address GEOSOUTHERN LAVACA PROPERTIES 1425 LAKE FRONT CIRCLE SUITE 200 THE WOODLANDS, TX 77380 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.566	Nonpriority creditor's name and mailing address GERALD F ACKERMAN 1337 POPLAR AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.567	Nonpriority creditor's name and mailing address GERALD FRED BENNETT 7812 SONGBIRD WAY CLINTON, WA 78236 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.568	Nonpriority creditor's name and mailing address GERALD W MITCHELL & 3085 NW 3RD AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc.	Case number (if known)
Name		
3.569	Nonpriority creditor's name and mailing address GHX INDUSTRIAL LLC PO BOX 4346 DEPT 207 HOUSTON, TX 77210-4346 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,285.80 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.570	Nonpriority creditor's name and mailing address GIANT ENERGY CO LP 12850 SPURLING RD STE 200 DALLAS, TX 75230 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$754.58 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.571	Nonpriority creditor's name and mailing address GILBERT C COX & 35068 PITTSBURG ROAD ST HELENS, OR 97051 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.572	Nonpriority creditor's name and mailing address GILBERT I WELLS & 600 DELMAR AVE PARMA, ID 83660 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.573	Nonpriority creditor's name and mailing address GINGER OIL COMPANY 1400 Woodloch Forest Dr #425 THE WOODLANDS, TX 77380 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.574	Nonpriority creditor's name and mailing address GLADYS WHADFORD 1075 N FIG ST ESCONDIDO, CA 92026 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.575	Nonpriority creditor's name and mailing address GLEN DALE MEYER 1502 BURTON AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
High Mesa, Inc.		
3.576	Nonpriority creditor's name and mailing address GLEND A D GRACE & 1755 KILLEBREW DRIVE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.577	Nonpriority creditor's name and mailing address GLEND A EUBANKS & 848 W LOCUST LANE NAMPA, ID 83686 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.578	Nonpriority creditor's name and mailing address GLENN ERHARDT 2237 APPLEWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.579	Nonpriority creditor's name and mailing address GLOBAL PROPERTIES LLC 900 W JEFFERSON ST BOISE, ID 83702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.580	Nonpriority creditor's name and mailing address GLORIA BROOKS WEISENBERGER AND JUDY R BR 15021 KATY FREEWAY SUITE 400 HOUSTON, TX 77094 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.581	Nonpriority creditor's name and mailing address Goliad County Tax Office 329 W Franklin St Goliad, TX 77963 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.582	Nonpriority creditor's name and mailing address GONZALES COUNTY TAX ASSESSOR PO BOX 677 GONZALES, TX 78629 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$248.20

Debtor	Name	Case number (if known)
3.583	High Mesa, Inc. Nonpriority creditor's name and mailing address GONZALO N LIERA & 1034 NORTHWEST 22ND ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.584	Nonpriority creditor's name and mailing address GORDON ARATA MONTGOMERY 201 ST CHARLES AVENUE 40TH FLOOR NEW ORLEANS, LA 70170-4000 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$227,926.45
3.585	Nonpriority creditor's name and mailing address Government Accountability Office 441 G St., NW Washington, DC 20548 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.586	Nonpriority creditor's name and mailing address GRACE BAPTIST CHURCH C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.587	Nonpriority creditor's name and mailing address Graham Royalty, Ltd. c/o John C. Anjier One Shell Square 701 Poydras St. Suite 5000 New Orleans, LA 70139-5099 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.588	Nonpriority creditor's name and mailing address Gratiot County Assessor's Office 214 E Center Street Ithaca, MI 48847 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.589	Nonpriority creditor's name and mailing address GREG A. MCINNIS C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	High Mesa, Inc.	Case number (if known)	
	Name		
3.590	Nonpriority creditor's name and mailing address GREG D KNIGHTEN & 8931 SOLTERBECK LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.591	Nonpriority creditor's name and mailing address GREG J RANDLEMAN 1560 NW 26TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.592	Nonpriority creditor's name and mailing address GREG M MESS 2409 NE 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.593	Nonpriority creditor's name and mailing address GREGORY C. SEMON 4892 LITTLE WILLOW RD. PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.594	Nonpriority creditor's name and mailing address GREGORY K. BROWN & 978 INDIANHEAD ROAD WEISER, ID 83672 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.595	Nonpriority creditor's name and mailing address Gregory Semon c/o Fisher Rainey Hudson 959 W Bannock St Suite 630 Boise, ID 83702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation - Multiple claimants \$500,000 Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.596	Nonpriority creditor's name and mailing address GREY WOLF SAFETY GROUP LLC PO BOX 1438 BROUSSARD, LA 70518 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$207.85

Debtor	Name	Case number (if known)
3.597	High Mesa, Inc. Groton Land Company, Inc. c/o CT Corporation 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.598	Guadalupe County Tax Office 1101 Elbel Rd Schertz, TX 78154 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.599	GUILLERMO TRUJILLO III 2505 APPLEWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.600	GULF OIL E&P COMPANY P.O. Drawer 1150 Midland, TX 79702 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.601	GULF SOUTH PIPELINE CO LP PO BOX 730000 DALLAS, TX 75373 Date(s) debt was incurred ____ Last 4 digits of account number ____	\$53,304.19 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.602	GULF/INLAND CONTRACTORS INC C/O SOUTH LOUISIANA BANK PO BOX 5091 HOUMA, LA 70361-5091 Date(s) debt was incurred ____ Last 4 digits of account number ____	\$3,242.08 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.603	Gulfport Energy Corp Jones Walker P O Drawer 3408 Lafayette, LA 70502-3408 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.604	Nonpriority creditor's name and mailing address GUSTAVO MATA SR 2406 GOLDEN AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.605	Nonpriority creditor's name and mailing address H BRADFORD HENSHAW 2694 BAYBERRY DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.606	Nonpriority creditor's name and mailing address H. L. Hawkins III Liskow & Lewis 701 Poydras Street, Suite 5000 New Orleans, LA 70139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,400,000.00
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3.607	Nonpriority creditor's name and mailing address HALE CONSULTING LLC 9273 WHITEHOUSE FORK ROAD EXT BAY MINCHE, AL 36307-9005 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,388.00
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3.608	Nonpriority creditor's name and mailing address HANKEY OIL COMPANY 4265 SAN FELIPE ST, STE 1050 Houston, TX 77027 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.609	Nonpriority creditor's name and mailing address Hanley Petroleum LLC c/o CT Corporation System 1999 Bryan Street, Suite 900 Dallas, LA 75201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.610	Nonpriority creditor's name and mailing address HARDIN SANITATION INC PO BOX 7428 PASADENA, CA 91109-7428 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37.37
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Debtor	High Mesa, Inc. Name	Case number (if known)
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3.611	Nonpriority creditor's name and mailing address HAROLD RAPER 11680 W CHINDEN RIDGE DR GARDEN CITY, ID 83714-1026 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.612	Nonpriority creditor's name and mailing address HAROLD WAYNE STUTZMAN & 8425 DUTCH LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.613	Nonpriority creditor's name and mailing address Harrison County Tax Collector 200 West Houston Suite 108 PO Box 967 Marshall, TX 75671 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.614	Nonpriority creditor's name and mailing address HARRY J WIGHTMAN 2600 WINESAP AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.615	Nonpriority creditor's name and mailing address HART FARMS INC. 270 JUNIPER RD. ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.616	Nonpriority creditor's name and mailing address HARVEY R STEPP & 1840 ADY ORCHARD RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.617	Nonpriority creditor's name and mailing address HAYNES & BOONE LLP PO BOX 841399 DALLAS, TX 75284-1399 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,681.00
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.618	Nonpriority creditor's name and mailing address HEATHER HUNT 108 NE 14TH DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.619	Nonpriority creditor's name and mailing address HEC PETROLEUM, INC. 15 SMITH RD MIDLAND, TX 79705 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.620	Nonpriority creditor's name and mailing address HECTOR C HERRERA 7767 ELMORE ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.621	Nonpriority creditor's name and mailing address HEIDI E HOUSTON 2824 DOGWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.622	Nonpriority creditor's name and mailing address HELEN PLAZA 2682 BAYBERRY DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.623	Nonpriority creditor's name and mailing address HELEN REED 2472 W FORECAST ST MERIDIAN, ID 83642 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.624	Nonpriority creditor's name and mailing address HELEN Y WATKINS 1005 VICTORIA AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
Debtor	High Mesa, Inc.	
3.625	Nonpriority creditor's name and mailing address HELIS OIL & GAS COMPANY, L.L.C. 701 Poydras st. Ste. 5000 New Orleans, LA 70139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.626	Nonpriority creditor's name and mailing address HELMS Confidential Confidential Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.627	Nonpriority creditor's name and mailing address Henrietta L. Sprinks c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.628	Nonpriority creditor's name and mailing address HENRY A FARROW & 1311 1/2 NW 19TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.629	Nonpriority creditor's name and mailing address HENRY PRODCUTION COMPANY INC. c/o OTTINGER HEBERT, LLC 1313 WEST PINHOOK ROAD LAFAYETTE, LA 70503 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.630	Nonpriority creditor's name and mailing address Herbert L. Sadler, Sr. c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,000,000.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.631	Nonpriority creditor's name and mailing address Hess Corporation c/o Elizabeth S. Wheeler Liskow & Lewis, One Shell Square 701 Poydras St. Suite 5000 New Orleans, LA 70139-5099 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.632	Nonpriority creditor's name and mailing address HIGHWAY DISTRICT NO 1 3890 NW 1ST AVENUE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.633	Nonpriority creditor's name and mailing address Hilcorp Energy Co c/o Craig Isenberg Barrasso Usdin 909 Poydras St Ste 2350 New Orleans, LA 70112 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.634	Nonpriority creditor's name and mailing address HILCORP ENERGY I LP PO BOX 61229 HOUSTON, TX 77208-1229 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.635	Nonpriority creditor's name and mailing address HILCORP ENERGY JOINT VENTURE 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.636	Nonpriority creditor's name and mailing address HINATSU FARMS LP 3341 NW 2ND AVE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.637	Nonpriority creditor's name and mailing address HK Energy, LLC c/o Loulan Joseph Pitre , Jr Kelly Hart & Pitre LLP 400 Poydras Street, Suite 1812 New Orleans, LA 70130 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.638	Nonpriority creditor's name and mailing address HOLLY HITE 2166 ALPINE CREEK DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. Name	Case number (if known)
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3.639	Nonpriority creditor's name and mailing address HOMER R HERITAGE & 1207 TARA CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.640	Nonpriority creditor's name and mailing address HOOVER HOLDINGS LLC 2200 E 1ST ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.641	Nonpriority creditor's name and mailing address HORIZON RESOURCE MGMT 840 7 Ave SW #1520 Calgary, AB T2P 3G2 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.642	Nonpriority creditor's name and mailing address HOWARD J FISHER & 253 SOUTH WEST BLVD NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.643	Nonpriority creditor's name and mailing address HSIAO-RO CHIANG 1310 ASPEN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.644	Nonpriority creditor's name and mailing address HTI SERVICES LLC PO BOX 709 STAR, ID 83669 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$77,192.00
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3.645	Nonpriority creditor's name and mailing address Huerfano County Assessor Office 401 Main St. Ste. 205 Walsenburg, CO 81089 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
3.646	High Mesa, Inc. HURLEY OIL COMPANY, INC 126 Heymann Boulevard Lafayette, LA 70503 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.647	Nonpriority creditor's name and mailing address HYRUM L. AUSTIN & 5047 SE 1-1/2 AVENUE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.648	Nonpriority creditor's name and mailing address IAN KOV TRUST DTD 4/18/13 4531 NW FREMONT ST CAMAS, WA 98607 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.649	Nonpriority creditor's name and mailing address Iberville Tax Collector 58050 Meriam St Plaquemine, LA 70764 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.650	Nonpriority creditor's name and mailing address IBRAHIM EBED 2222 BISHOP RD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.651	Nonpriority creditor's name and mailing address IDAHO DEPARTMENT OF LANDS 300 NORTH 6TH STREET STE 103 PO BOX 83720 BOISE, ID 83720-0050 Date(s) debt was incurred <u>2019</u> Last 4 digits of account number ____	\$50,361.57 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.652	Nonpriority creditor's name and mailing address IDAHO DEPARTMENT OF LANDS 300 NORTH 6TH STREET STE 103 PO BOX 83720 BOISE, ID 83720-0050 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.653	Nonpriority creditor's name and mailing address Idaho Midstream, LLC Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Debtor resigned as operator.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.654	Nonpriority creditor's name and mailing address IDAHO NORTHERN & PACIFIC 119 N COMMERCIAL AVE EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.655	Nonpriority creditor's name and mailing address Idaho State Tax Commission 11321 W Chinden Blvd Garden City, ID 83714 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.656	Nonpriority creditor's name and mailing address INDALECIO RODRIGUEZ & 1333 POPLAR AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.657	Nonpriority creditor's name and mailing address Innovative Energy Services, Inc 16600 Park Row Houston, TX 77084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$92,000.00
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3.658	Nonpriority creditor's name and mailing address Intercompany Accounts Payable Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.659	Nonpriority creditor's name and mailing address INTERNATIONAL PETROLEUM LLC 4834 South Highland Drive Suite 200 Salt Lake City, UT 84117 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known)
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3.660	Nonpriority creditor's name and mailing address INTERSTATE EXPLORATIONS LLC 1331 Lamar St #1370 Houston, TX 77010 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.661	Nonpriority creditor's name and mailing address IRENE J ROLAND 4362 SAGE RD ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.662	Nonpriority creditor's name and mailing address IRISH OIL AND GAS COMPANY 2500 Tanglewilde Suite 272 Houston, TX 77063 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.663	Nonpriority creditor's name and mailing address IRON MOUNTAIN PO BOX 915004 DALLAS, TX 75391-5004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,154.47
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3.664	Nonpriority creditor's name and mailing address IRVCO ASPHALT & GRAVEL INC PO BOX 931 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.665	Nonpriority creditor's name and mailing address IRVIN CATTLE COMPANY, INC 7504 CUSTER ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.666	Nonpriority creditor's name and mailing address ISAAC ALLRIDGE, JR. C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known)
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3.667	Nonpriority creditor's name and mailing address ISNARDA RODRIGUEZ 1600 NW 26TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.668	Nonpriority creditor's name and mailing address ISREAL GONZALEZ JUAREZ 106 PARADISE COURT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.669	Nonpriority creditor's name and mailing address Ivan J. Kirk c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.670	Nonpriority creditor's name and mailing address J & A REAL ESTATE COMPANY, LLC 2860 NW 4TH AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.671	Nonpriority creditor's name and mailing address J & J OF NORTHWEST FL INC PO BOX 666 JAY, FL 32565 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,365.31
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3.672	Nonpriority creditor's name and mailing address J JAY & JOYCE D GARRETT 1308 TARA CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.673	Nonpriority creditor's name and mailing address J R SIMPLOT COMPANY PO BOX 27 BOISE, ID 83707 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc.		Case number (if known)
	Name		
3.674	Nonpriority creditor's name and mailing address J ROBERT QUINLY & 226 CRIMSON CIRCLE EAST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.675	Nonpriority creditor's name and mailing address J&M JOYCE & MCFARLAND LLP 712 MAIN ST STE 1500 HOUSTON, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,002.00
3.676	Nonpriority creditor's name and mailing address J. JAN JIRCIK P.C. 4355 Sylvanfield Blvd #205 Houston, TX 77014 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.677	Nonpriority creditor's name and mailing address J.P. OIL COMPANY, INC. 1604 West Pinhook Rd., Ste. 300 LAFAYETTE, LA 70508 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.678	Nonpriority creditor's name and mailing address JACK S JONES 2610 NE 16TH ST PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.679	Nonpriority creditor's name and mailing address JACKSON WALKER LLP PO BOX 130989 DALLAS, TX Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$48,580.30
3.680	Nonpriority creditor's name and mailing address JACOB BROWN 2770 NW 4TH AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	Name	Case number (if known)
3.681	High Mesa, Inc. JACQUELINE STURDIVANT AKA P O BOX 1155 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.682	JAIME J KURATA 307 E 1ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.683	JAIME P MARTINEZ & 2060 SPRING CREEK DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.684	JAMES A BUTTRAM & 2233 NE 8TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.685	JAMES A JENNINGS & 7740 RICHEY RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.686	JAMES AND PATRICIA ALLEN FAMILY PARTNERS 4019 COLERIDGE HOUSTON, TX 77005 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.687	JAMES AUSTIN GUTHRIE C/O TALBO, CARMOUCHE, & MARCELLO 214 W. COMERVIEW PO BOX 759 GONZALES, LA 70707 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.688	Nonpriority creditor's name and mailing address James Austin Guthrie and William Earl Guthrie Talbot Carmouche & Marcello 17405 Perkins Road Baton Rouge, LA 70810 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.689	Nonpriority creditor's name and mailing address JAMES DANIEL 1581 POPLAR AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.690	Nonpriority creditor's name and mailing address JAMES E & DOROTHY I MCCOSH 1906 HEITZ AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.691	Nonpriority creditor's name and mailing address JAMES F MILLER JR 7193 ELMORE RD FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.692	Nonpriority creditor's name and mailing address JAMES H MCDAVID 2687 BAYBERRY DR FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.693	Nonpriority creditor's name and mailing address JAMES H MOORE & 8630 SHANNON RD PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.694	Nonpriority creditor's name and mailing address JAMES H STILTZ & 8911 WASHOE ROAD PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. Name	Case number (if known)
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3.695	Nonpriority creditor's name and mailing address JAMES H. MASHBURN, JR. C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.696	Nonpriority creditor's name and mailing address JAMES J ENGLAND & 4600 BUTTE RD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.697	Nonpriority creditor's name and mailing address JAMES J LACRONE PO BOX 52 NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.698	Nonpriority creditor's name and mailing address JAMES L MACFARLANE 7900 RICHEY RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.699	Nonpriority creditor's name and mailing address JAMES L SMITH & 8516 SHANNON RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.700	Nonpriority creditor's name and mailing address JAMES LELAND RUSSELL 1416 NW 15TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.701	Nonpriority creditor's name and mailing address JAMES M FLANNERY JR 1503 LUCILLE AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
Debtor	High Mesa, Inc.	
3.702	Nonpriority creditor's name and mailing address JAMES M MACFARLANE TRUST & PO BOX 926 FRUITLAND, ID 83619-0926 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.703	Nonpriority creditor's name and mailing address JAMES M. LEVINS, SR. C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.704	Nonpriority creditor's name and mailing address JAMES OGDEN UNIT/WELLS, UPSHUR COUNTY, W 16600 Park Row, Suite 158 HOUSTON, TX 77084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.705	Nonpriority creditor's name and mailing address JAMES PATRICK DILLE 2635 DOGWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.706	Nonpriority creditor's name and mailing address JAMES R AND GAILAN M MAY TRUST 191 S LARKWOOD STREET ANAHEIM, CA 92808 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.707	Nonpriority creditor's name and mailing address JAMES R ASMUSSEN & 8340 DUTCH LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.708	Nonpriority creditor's name and mailing address JAMES R CIARDELLI & PO BOX 877 EMMETT, ID 83617-0877 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.709	Nonpriority creditor's name and mailing address JAMES R KING & 969 SUNSET DRIVE ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.710	Nonpriority creditor's name and mailing address JAMES R MITCHELL 101 NE 16TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.711	Nonpriority creditor's name and mailing address JAMES R SMITH PO BOX 984 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.712	Nonpriority creditor's name and mailing address JAMES R WEBSTER 8516 WASHOE RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.713	Nonpriority creditor's name and mailing address James T. Bond Unknown Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.714	Nonpriority creditor's name and mailing address JAMES W HOUSTON & 2143 BISHOP AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.715	Nonpriority creditor's name and mailing address JAMES WATKINS JR ET UX & 5758 HILLVIEW ROAD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.716	Nonpriority creditor's name and mailing address Janex Oil Co Inc c/o Brodie G Glenn Bradley Murchison et al 1100 Poydras St Ste 2700 New Orleans, LA 70163 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.717	Nonpriority creditor's name and mailing address JANICE G LAMB & 539 VALLEY CIRCLE RD HAGERMAN, ID 83332-5041 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.718	Nonpriority creditor's name and mailing address JANICE PRICE C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.719	Nonpriority creditor's name and mailing address JAQUELYN LEE HIATT 6934 HUMMEL DR. BOISE, ID 83709 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.720	Nonpriority creditor's name and mailing address JARED T TAGGART & 305 NW 9TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.721	Nonpriority creditor's name and mailing address JASON JUNGLING 807 NW 24TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.722	Nonpriority creditor's name and mailing address JASON R PETT 1000 NW 24TH ST FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
3.723	High Mesa, Inc. JASON S LLOYD 2815 NW 4TH AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.724	JAY AUTO PARTS INC PO BOX 702 MILTON, FL 32572 Date(s) debt was incurred ____ Last 4 digits of account number ____	\$36.38 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.725	JAY D STRINGER & JOLINDA D DTD 9/25/14 PO BOX 160 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.726	Jeanerette Lumber and Shingle Company c/o Jones Swanson Huddell & Garrison LLC 601 Poydras st Suite 2655 New Orleans, LA 70130 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.727	JEANETTE H JONES 1587 POPLAR DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.728	JEANETTE L KOEHN 1595 POPLAR AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.729	JEANETTE LOUISE JENKINS 40701 RANCHO VISTA BLVD #236 PALMDALE, CA 93551 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. Name	Case number (if known)
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3.730	Nonpriority creditor's name and mailing address JEANNE GOSS 2228 EAST 46TH AVE SPOKANE, WA 99223 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.731	Nonpriority creditor's name and mailing address JEFF & KATHY RICE TRUST 8052 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.732	Nonpriority creditor's name and mailing address Jeff Landry c/o Baldwin, Haspel, Burke & Mayer, LLC Energy Center 1100 Poydras St., Suite 3600 New Orleans, LA 70163-2200 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.733	Nonpriority creditor's name and mailing address JEFFERSON C LANGHAM P O BOX 1366 SHEPHERD, TX 77371 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,000.00
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3.734	Nonpriority creditor's name and mailing address Jefferson Davis Parish Assessor 300 N State St Jennings, LA 70546 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.735	Nonpriority creditor's name and mailing address JEFFREY A HYATT A/K/A 3400 2ND LANE EAST PARMA, ID 83660 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.736	Nonpriority creditor's name and mailing address JEFFRY L ALLEN Confidential Confidential Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc.	Case number (if known)
Name		
3.737	Nonpriority creditor's name and mailing address JENNIFER JO REINS 8006 WESTGATE BLVD #A AUSTIN, TX 78745 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.738	Nonpriority creditor's name and mailing address JERELD L CHAPMAN & 7228 CUSTER ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.739	Nonpriority creditor's name and mailing address JEROME G WANDERS & 15051 KINGS ROW DR CALDWELL, ID 83607 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.740	Nonpriority creditor's name and mailing address JERRY D CAMPBELL & PO BOX 84 2120 E 1ST STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.741	Nonpriority creditor's name and mailing address JERRY E JACKSON & 1503 JESSICA AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.742	Nonpriority creditor's name and mailing address JERRY L ANDERSON & P O BOX 134 PAYETTE, ID 83661-0134 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.743	Nonpriority creditor's name and mailing address JERRY L MATLOCK 7755 ELMORE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.744	Nonpriority creditor's name and mailing address JERRY R NEISINGER & 202 N KANSAS AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.745	Nonpriority creditor's name and mailing address JESSE T WETZEL 2280 NE 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.746	Nonpriority creditor's name and mailing address JESUS A MADERA 2405 APPLEWOOD AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.747	Nonpriority creditor's name and mailing address JESUS L INIGUEZ 302 SW 4TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.748	Nonpriority creditor's name and mailing address JIMMEY W JUNGLING & 3081 NW 3RD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.749	Nonpriority creditor's name and mailing address JIMMIE L & NORMA J GREENE 8512 SHANNON RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.750	Nonpriority creditor's name and mailing address JIMMIE R & JUDY A HICKS 1540 NW 6TH AVE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. Name	Case number (if known)
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3.751	Nonpriority creditor's name and mailing address JIMMY D NOYES 807 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.752	Nonpriority creditor's name and mailing address Jimmy Freeman c/o Shelly Sitton P O Drawer 1617 Livingston, TX 77351 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.753	Nonpriority creditor's name and mailing address JIMMY L BETTS & 875 NW 3RD ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.754	Nonpriority creditor's name and mailing address JMB COTE BLANCHE LLC PO BOX 333 FRANKLIN, LA 70538 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.755	Nonpriority creditor's name and mailing address JOAN ELIZABETH TRAIL LESTER 1919 HIGHWAY 26 DERIDDER, LA 70634 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.756	Nonpriority creditor's name and mailing address JOAN P NEUBAUER TRUST 1303 N OREGON AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.757	Nonpriority creditor's name and mailing address JOANN GIVENS C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known)
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3.758	Nonpriority creditor's name and mailing address JOANN RATCLIFF C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.759	Nonpriority creditor's name and mailing address JOANNE DOOLITTLE PO BOX 24264 FEDERAL WAY, WA 98093 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.760	Nonpriority creditor's name and mailing address JOANNE E MCGEE 209 S MAIN ST PENDLETON, OR 97801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.761	Nonpriority creditor's name and mailing address JODI RENEE PO BOX 1046 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.762	Nonpriority creditor's name and mailing address JOE D PIPER & 308 NORTH DAKOTA FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.763	Nonpriority creditor's name and mailing address JOE LUIS GONZALEZ 1008 GOLDEN AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.764	Nonpriority creditor's name and mailing address JOE TORRES JR 2613 NW 4TH AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.765	Nonpriority creditor's name and mailing address JOE W PENDERGRASS 2748 SPRUCE DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.766	Nonpriority creditor's name and mailing address JOEL AND JAN BARNES TRUST 206 N DAKOTA AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.767	Nonpriority creditor's name and mailing address JOEL M CLEMENTS 1311 ASPEN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.768	Nonpriority creditor's name and mailing address JOHANSON & FAIRLESS LLP 1456 FIRST COLONY BLVD SUGAR LAND, TX 77479 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$808.47
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3.769	Nonpriority creditor's name and mailing address JOHN & DOREEN MCDADE 7420 GRANDE VALLEJO DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.770	Nonpriority creditor's name and mailing address JOHN & PAULA SRHOLEC LIVING TR 1404 JESSICA AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.771	Nonpriority creditor's name and mailing address JOHN AND YVETTE DELCAMBRE 6516 DASPIT RD NEW IBERIA, LA 70563 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,400.00
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.772	Nonpriority creditor's name and mailing address JOHN BAKER & 2140 MAPLE CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.773	Nonpriority creditor's name and mailing address JOHN C & MARTHA M MATLOCK 850 W 1ST STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.774	Nonpriority creditor's name and mailing address John C. Lovell, Jr. Liskow & Lewis 701 Poydras Street, Suite 5000 New Orleans, LA 70139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.775	Nonpriority creditor's name and mailing address JOHN CRANE INC 24929 NETWORK PLACE CHICAGO, IL 60673-1249 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,159.77
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3.776	Nonpriority creditor's name and mailing address JOHN D VILLEGIANTE 8100 ESTATES BLVD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.777	Nonpriority creditor's name and mailing address JOHN F. BRICKER & COMPANY 200 PARK AVE NEW YORK, NY 10166 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.778	Nonpriority creditor's name and mailing address JOHN GIBSON & 1202 TARA CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.779	Nonpriority creditor's name and mailing address JOHN H GETTLE & 5417 HWY 30 SOUTH NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.780	Nonpriority creditor's name and mailing address JOHN R HANSEN 2122 E 1ST ST FRUITLAND, ID 83169 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.781	Nonpriority creditor's name and mailing address JOHN R HICKEY JR & 2604 WINESAP AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.782	Nonpriority creditor's name and mailing address JOHN TIMOTHY SHIRTS 2605 APPLEWOOD AVE. FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.783	Nonpriority creditor's name and mailing address JOHN W GILLUM JR 1409 NE 15TH CIRCLE DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.784	Nonpriority creditor's name and mailing address JOHN W GRAVERSEN 8164 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.785	Nonpriority creditor's name and mailing address JOHN W ORTON & 2690 BAYBERRY DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known)
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3.786	Nonpriority creditor's name and mailing address JOHN W SWANDER 4333 BUTTE RD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.787	Nonpriority creditor's name and mailing address JOHNSTON FAMILY TRUST 4440 SW 5TH AVE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,400.00
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3.788	Nonpriority creditor's name and mailing address JOINT REVOCABLE TRUST OF CARYL 11431 WEST HICKORY LOOP DRIVE BOISE, ID 83713 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.789	Nonpriority creditor's name and mailing address JON C POWELL 4409 WEST KELSEY CREEK STREET EAGLE, ID 83616 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.790	Nonpriority creditor's name and mailing address JON LINDSEY AKA JONATHAN 2163 ALPINE CREEK DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.791	Nonpriority creditor's name and mailing address JON M ECKERLE & 2290 NE 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.792	Nonpriority creditor's name and mailing address JON M SWARTZ & 51531 SE QUINCE RD SOUTH BEND, IN 46628 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known)
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3.793	Nonpriority creditor's name and mailing address JONATHAN E SKINNER 5000 NW 1ST AVE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.794	Nonpriority creditor's name and mailing address JONATHAN L HENSLEY & 260 SYCAMORE AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.795	Nonpriority creditor's name and mailing address Jones Co Ltd c/o Francis V Liantonio, Jr Adams & Reese 701 Poydras St Ste 4500 New Orleans, LA 70139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.796	Nonpriority creditor's name and mailing address JONES OILFIELD SERVICE SUPPLY PO BOX 919321 DALLAS, TX 75391-9321 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,322.28
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3.797	Nonpriority creditor's name and mailing address JORDAN OIL COMPANY UNKNOWN Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.798	Nonpriority creditor's name and mailing address JOSE C GARCIA & 1039 NW 22ND ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.799	Nonpriority creditor's name and mailing address JOSE DANIEL ANAYA CUELLAR & 140 NORTHEAST 8TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.800	Nonpriority creditor's name and mailing address JOSE J CISNEROS & 2270 BISHOP AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.801	Nonpriority creditor's name and mailing address JOSE L GONZALEZ ZAVALA & 1003 BRAEBURN FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.802	Nonpriority creditor's name and mailing address JOSE LUIS VALERO & 2609 APPLEWOOD AVENUE FRUITLAND, ID 93619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.803	Nonpriority creditor's name and mailing address JOSE M RIOS 248 SYCAMORE AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.804	Nonpriority creditor's name and mailing address JOSE P CAMARILLO 1314 ASPEN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.805	Nonpriority creditor's name and mailing address JOSE P MONCADA 1012 GOLDEN AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.806	Nonpriority creditor's name and mailing address JOSE RAFAEL GONZALEZ & 2502 GOLDEN AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.807	Nonpriority creditor's name and mailing address JOSE VALLE & 2609 ROME AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.808	Nonpriority creditor's name and mailing address JOSEPH A REEVES JR 11211 WILDING LANE HOUSTON, TX 77024-6315 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.809	Nonpriority creditor's name and mailing address JOSEPH D HARRIS 2715 DOGWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.810	Nonpriority creditor's name and mailing address JOSEPH D MILLSAP & 7825 ELMORE RD FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.811	Nonpriority creditor's name and mailing address JOSEPH D ROHRBACHER 1438 WEST 12TH STREET EMMETT, ID 83617 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.812	Nonpriority creditor's name and mailing address Joseph Hayes Jr. 481 Lake Long Drive Houma, LA 70364 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.813	Nonpriority creditor's name and mailing address JOSEPH J KATANCIK 2727 DOGWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.814	Nonpriority creditor's name and mailing address JOSEPH L LANGDON 1054 NW 23RD ST FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.815	Nonpriority creditor's name and mailing address JOSEPH L SNOW & 110 NE 11TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.816	Nonpriority creditor's name and mailing address JOSEPH W LEVANGER & 4300 SW 4TH AVE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.817	Nonpriority creditor's name and mailing address Joseph Wilbert Bryant Jr et al c/o Talbot Carmouche & Marcello Attn Donald T Carmouche 17405 Perkins Road Baton Rouge, LA 70810 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.818	Nonpriority creditor's name and mailing address JOSEPH WILSON MHIRE 31508 W LA HWY 82 KAPLAN, LA 70548 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$456.90
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3.819	Nonpriority creditor's name and mailing address JOSH J GRIFFITH & 8020 ESTATES BLVD FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.820	Nonpriority creditor's name and mailing address JOSHUA J ESSINGER P O BOX 278 FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
3.821	High Mesa, Inc. Nonpriority creditor's name and mailing address JOSHUA MEYER & 914 VICTORIA DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.822	Nonpriority creditor's name and mailing address JOSHUA SWANN AKA 2144 MAPLE COURT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.823	Nonpriority creditor's name and mailing address JOVANI SALDIVAR & 2688 BAYBERRY DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.824	Nonpriority creditor's name and mailing address JOY RESOURCES INC. 4605 Post Oak PI Dr #250 Houston, TX 77027 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.825	Nonpriority creditor's name and mailing address JOYCE TURNBAUGH 407 NW 2ND STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.826	Nonpriority creditor's name and mailing address JUAN A PENA JR & 2616 WINESAP AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.827	Nonpriority creditor's name and mailing address JUAN J AMAYA & 210 N PENNSYLVANIA STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.828	Nonpriority creditor's name and mailing address JUAN SANDOVAL & 2026 CENTER AVENUE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.829	Nonpriority creditor's name and mailing address JUANITA BAKER 8602 NE MASON DR #19 VANCOUVER, WA 98662 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.830	Nonpriority creditor's name and mailing address JUDY ANN PHILLIPS 2611 ALDER DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.831	Nonpriority creditor's name and mailing address JUDY R BATTLES 7015 SE 31ST AVENUE PORTLAND, OR 97202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.832	Nonpriority creditor's name and mailing address JUDY RAINWATER 435 N 10TH STREET PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.833	Nonpriority creditor's name and mailing address JULIE ANN ROBERTS P. O. BOX 992 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.834	Nonpriority creditor's name and mailing address JULIE C GOSS 1409 EAST 35TH AVE SPOKANE, WA 99223 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
3.835	High Mesa, Inc. JULIE COLE 840 THREADNEEDLE #177 HOUSTON, TX 77079 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$330.00
3.836	Nonpriority creditor's name and mailing address Julie Sheerin c/o Shelly Sitton P O Drawer 1617 Livingston, TX 77351 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.837	Nonpriority creditor's name and mailing address JUSTIN C HAYES 2723 DOGWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.838	Nonpriority creditor's name and mailing address JUSTIN E SMITH 5847 AKRON ROAD NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.839	Nonpriority creditor's name and mailing address JUSTIN GIBB & 540 SYRINGA FALLS CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.840	Nonpriority creditor's name and mailing address JUSTIN W HOWARD & 1802 N VISTA AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.841	Nonpriority creditor's name and mailing address Justiss Oil Company, Inc. 1120 East Oak Street Jena, LA 71342 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Debtor resigned as operator.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.842	Nonpriority creditor's name and mailing address JW POWER COMPANY PO BOX 205856 DALLAS, TX 75320-5856 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,280.82
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3.843	Nonpriority creditor's name and mailing address KARA L GRUELL 2681 BAYBERRY DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.844	Nonpriority creditor's name and mailing address KAREN MEYE 9120 W PIRATES COURT SPOKANE, WA 99224 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.845	Nonpriority creditor's name and mailing address KAREN OLTMAN 8970 HURD LN PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.846	Nonpriority creditor's name and mailing address KAREN Y DISHION 1907 W FLAMINGO AVE #164 NAMPA, ID 83651 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.847	Nonpriority creditor's name and mailing address KARL R KOSIER 848 UPPER TURTLE CREEK RD #2 KERRVILLE, TX 78028 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.848	Nonpriority creditor's name and mailing address KARLEN S BURNS & 8059 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.849	Nonpriority creditor's name and mailing address KARMA JEAN GEHRKE 2720 DOGWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.850	Nonpriority creditor's name and mailing address Kathleen A. Moore c/o Fisher Rainey Hudson 957 W Bannock St Suite 630 Boise, ID 83702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation - Multiple claimants \$500,000 Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.851	Nonpriority creditor's name and mailing address KATHLEEN J DAY 206 N KANSAS AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.852	Nonpriority creditor's name and mailing address KATHLEEN M SKOW 2475 COVE RD WEISER, ID 83672 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.853	Nonpriority creditor's name and mailing address KATHY L ANCHUSTEGUI 204 NW 9TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.854	Nonpriority creditor's name and mailing address KATHY SMITH 1610 FOSSIL PARK DR. KATY, TX 77494 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$191.09 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.855	Nonpriority creditor's name and mailing address KATRINA K ROOT 8580 RABY LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.856	Nonpriority creditor's name and mailing address KAY MCLAUCHLAN & 1586 POPLAR AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.857	Nonpriority creditor's name and mailing address KAYE A SHIPPY 8590 RABY LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.858	Nonpriority creditor's name and mailing address KAYSONN CHIN PO BOX 707 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.859	Nonpriority creditor's name and mailing address KEITH J & NANCY L KOLAR 8680 SHANNON RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.860	Nonpriority creditor's name and mailing address KEITH J GAYDA 1002 BRAEBURN STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.861	Nonpriority creditor's name and mailing address KEITH L MCGEHEE & 2307 SHAMROCK CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.862	Nonpriority creditor's name and mailing address KEITH S ANDERSON & 8600 RABY LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.863	Nonpriority creditor's name and mailing address KEITH SCHRENK & 2070 NE 8TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.864	Nonpriority creditor's name and mailing address Keith Stutes c/o Donald T Carmouche Talbot Carmouche & Marcello 17405 Perkins Rd Springfield, LA 70881-3824 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.865	Nonpriority creditor's name and mailing address Keith Stutes, District Attorney Archdiocese of New Orleans c/o Talbot Carmouche & Marcello 17405 Perkins Road Baton Rouge, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.866	Nonpriority creditor's name and mailing address KEITH V SMITH 6310 HOLY CROSS LN CASTLE ROCK, CO 80108 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.867	Nonpriority creditor's name and mailing address KELLEY BROTHERS CONTRACTORS INC PO DRAWER 1079 WAYNESBORO, MS 39367 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,929.54
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3.868	Nonpriority creditor's name and mailing address KELLY CHAMPION FRANEK 835 N 9TH ST PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.869	Nonpriority creditor's name and mailing address KELLY CRACE 4640 SW 160TH AVE BEAVERTON, OR 97078 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
3.870	High Mesa, Inc. KELLY J RHINEHART & 603 THREE RIVERS WAY FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.871	KELLY L SUTTON & JANIS SUTTON DTD 5-12-11 1406 JESSICA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.872	KELSI J BARTON 1077 NORTHWEST 21ST STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.873	KEN & JULIA A BISHOP 315 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.874	KENDALL R SIMMONS 7730 RICHEY RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.875	KENNETH ALLEN RICHARDS 3912 SPINNAKER RUN POINT LITTLE ELM, TX 75068-3110 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.876	KENNETH C HUIT 7461 USTICK ROAD NAMPA, ID 83687 Date(s) debt was incurred ____ Last 4 digits of account number ____	Unknown As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.877	Nonpriority creditor's name and mailing address KENNETH E ALAN 8475 ALDEN RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.878	Nonpriority creditor's name and mailing address KENNETH I BLAGG & 1807 NORTH VISTA DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.879	Nonpriority creditor's name and mailing address KENNETH L LISLE & 6580 ELMORE RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.880	Nonpriority creditor's name and mailing address KENNETH R & REIKO WALSTON 1011 JONATHAN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.881	Nonpriority creditor's name and mailing address KENNETH R PURDOM II TRUST 6217 HILL AVENUE WHITTIER, CA 90601 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.882	Nonpriority creditor's name and mailing address KENNETH SCHAPPERT 8077 ESTATES BLVD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.883	Nonpriority creditor's name and mailing address KENNETH W CROSS 500 EASTER AVE MILPITAS, CA 95035 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor High Mesa, Inc. Name		Case number (if known)	
3.884	Nonpriority creditor's name and mailing address KENTWOOD SPRINGS WATER COMPANY PO BOX 660579 DALLAS, TX 75266-0579 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$359.58
3.885	Nonpriority creditor's name and mailing address KERR MCGEE 16666 Northchase Dr Houston, TX 77060 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.886	Nonpriority creditor's name and mailing address KERR-McGEE CHEMICAL WORLDWIDE, LLC C/O THE CORPORATION TRUST COMPANY 1209 N ORANGE ST WILMINGTON, DE 19801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.887	Nonpriority creditor's name and mailing address KERR-MCGEE OIL & GAS ONSHORE LP 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.888	Nonpriority creditor's name and mailing address KEVIN D CLEVENGER 1970 NW 24TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.889	Nonpriority creditor's name and mailing address KEVIN E HUSFLOEN 8020 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.890	Nonpriority creditor's name and mailing address KEVIN L SHOEMAKER & 7170 DENVER RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	Name	Case number (if known)
3.891	High Mesa, Inc. Nonpriority creditor's name and mailing address KEVIN O'NEIL 3705 ELMORE ROAD PARMA, ID 83660 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.892	Nonpriority creditor's name and mailing address KIM M MIGLIACCIO 903 NW 24TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.893	Nonpriority creditor's name and mailing address KIM NICHOLS 8135 ESTATES BLVD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.894	Nonpriority creditor's name and mailing address KIMBERLY ANN TAYLOR CLARKE 9196 PHANTOM COURT MIDDLETON, ID 83644 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.895	Nonpriority creditor's name and mailing address KIMBERLY L BUTLER 1538 DOGWOOD CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.896	Nonpriority creditor's name and mailing address Kimberly Saar Parsons Confidential Confidential Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.897	Nonpriority creditor's name and mailing address KIMMIE K SERRANO 2067 SHELLEY DRIVE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	High Mesa, Inc. Name	Case number (if known)
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3.898	Nonpriority creditor's name and mailing address KIRK B REDLIN 400 NE 16TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.899	Nonpriority creditor's name and mailing address KIRKLAND & ELLIS LLP 300 NORTH LASALLE STREET CHICAGO, IL 60654-3406 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$108,737.50
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3.900	Nonpriority creditor's name and mailing address KLINT R KOSIER 5301 BROWN HEART LANE MIDLAND, TX 79707 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.901	Nonpriority creditor's name and mailing address KODIAK EXPLORATION, INC. 4057 FIELD DRIVE WHEAT RIDGE, CO 80033 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.902	Nonpriority creditor's name and mailing address KOEPPEN FAMILY TRUST UTD 1583 NW 26TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.903	Nonpriority creditor's name and mailing address L & R ENVIRONMENTAL LANDFARMS PO BOX 65 KUNA, ID 83634 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$34,008.70
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3.904	Nonpriority creditor's name and mailing address L AND E HAYNES TR UTA DTD 301 W 1ST STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor Name	Case number (if known)
High Mesa, Inc. Name	
3.905 Nonpriority creditor's name and mailing address L L O G Exploration & Production Co L L c/o Douglas C Longman , Jr Jones Walker P O Drawer 3408 Lafayette, LA 70502-3408 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.906 Nonpriority creditor's name and mailing address LA DEPT OF ENVIRONMENTAL QLTY DEQ FINANCIAL SERVICES DIV ATTN ACCOUNTS RECEIVABLE PO BOX 4311 BATON ROUGE, LA 70821-4311 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$14,105.90
3.907 Nonpriority creditor's name and mailing address LA VERNE EDWARD RATHBUN 2509 APPLEWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.908 Nonpriority creditor's name and mailing address LACASSANE CO INC 500 Kirby St Lake Charles, LA 70601 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.909 Nonpriority creditor's name and mailing address LACASSANE PROJECT AREA EXPLORATION AGREE Confidential Confidential Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.910 Nonpriority creditor's name and mailing address LARENE SHIRAR PO BOX 394 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.911 Nonpriority creditor's name and mailing address LARRY AND LINDA HALE TRUST 1557 NORTH WEST 26TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.912	Nonpriority creditor's name and mailing address LARRY AND MARILYN OHLER LIVING 2240 NE 8TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.913	Nonpriority creditor's name and mailing address LARRY D LEAVITT 164 ASH LOOP FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.914	Nonpriority creditor's name and mailing address LARRY D SCHIMMELS 1578 POPLAR DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.915	Nonpriority creditor's name and mailing address LARRY E ROBB 10210 W WHISPERING CLIFFS DR BOISE, ID 83704 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.916	Nonpriority creditor's name and mailing address LARRY G CHANDLER & 8512 WASHOE ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.917	Nonpriority creditor's name and mailing address LARRY JOE BRENTON & 907 NORTH VICTORIA FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.918	Nonpriority creditor's name and mailing address LARRY W DAWSON & 1617 NORTH WEST 26TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.919	Nonpriority creditor's name and mailing address LARRY W STUCK & 2100 E 1ST ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.920	Nonpriority creditor's name and mailing address Latex-Star Inc c/o John Pratt Farnsworth Stone Pigman et al 909 Poydras St Ste 3150 New Orleans, LA 70112-4042 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.921	Nonpriority creditor's name and mailing address LAURA A ELLIOTT 105 NE 14TH DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.922	Nonpriority creditor's name and mailing address LAURENCE HARVEY OLLOM P.O. BOX 78423 SEATTLE, WA 98178 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.923	Nonpriority creditor's name and mailing address LAURIE A STAAKE PO BOX 1025 EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.924	Nonpriority creditor's name and mailing address LAURIE WALDRON FAITH 5205 HWY 20/26 TRLR 5 CALDWELL, ID 83605 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.925	Nonpriority creditor's name and mailing address LAVACA COUNTY TAX ASSESSOR PO BOX 293 HALLETTSVILLE, TX 77964 Date(s) debt was incurred <u>2019</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$627.79
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Debtor	Name	Case number (if known)
3.926	High Mesa, Inc. Nonpriority creditor's name and mailing address LAWRENCE M FINNEY & 7601 N NEVADA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.927	Nonpriority creditor's name and mailing address LAWRENCE NEIL OLSON & 2029 1ST AVENUE N PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.928	Nonpriority creditor's name and mailing address LAYNA HAUSER 2604 GOLDEN AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.929	Nonpriority creditor's name and mailing address LDC Operating, Inc. c/o Steven L. Long 101 Hiawatha Road Lafayette, LA 70501 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.930	Nonpriority creditor's name and mailing address LEE A BROWN & 5797 AKRON ROAD NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.931	Nonpriority creditor's name and mailing address LEE S KUDRNA 3033 NW 3RD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.932	Nonpriority creditor's name and mailing address LEEROY & LORRIE TRACY TRUST 8144 ESTATES BLVD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown

Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.933	<p>Nonpriority creditor's name and mailing address LEEROY AND LORRIE TRACY TRUST 8144 ESTATES BLVD FRUITLAND, ID 83619</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Royalty Interest</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.934	<p>Nonpriority creditor's name and mailing address LEON COUNTY TAX ASSESSOR PO BOX 37 CENTERVILLE, TX 75833-0037</p> <p>Date(s) debt was incurred <u>2019</u> Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$14.48</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.935	<p>Nonpriority creditor's name and mailing address LEON COX C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>LITIGATION</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.936	<p>Nonpriority creditor's name and mailing address LEON MANNING 2850 BANNOCK HWY 15 POCATELLO, ID 83204</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Royalty Interest</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.937	<p>Nonpriority creditor's name and mailing address LEONARD A NEWMAN & 7850 ELMORE ROAD FRUITLAND, ID 83619</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Royalty Interest</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.938	<p>Nonpriority creditor's name and mailing address LEONARD R MCCURDY & 2304 NE 16TH ST FRUITLAND, ID 83619</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Royalty Interest</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.939	<p>Nonpriority creditor's name and mailing address Leroy J Hayes 481 Lake Long Drive Houma, LA 70364</p> <p>Date(s) debt was incurred _ Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown</p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Litigation</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	High Mesa, Inc.		Case number (if known)
	Name		
3.940	Nonpriority creditor's name and mailing address LEROY J. LEBOEUF, SR. C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.941	Nonpriority creditor's name and mailing address LEROY NORMAN, SR. C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.942	Nonpriority creditor's name and mailing address LES & UNA DAVIS LIVING TRUST 222 BUCK RD SWEET, ID 83670 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.943	Nonpriority creditor's name and mailing address LESLIE & MARGARET GARDNER 8660 SHANNON RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.944	Nonpriority creditor's name and mailing address LESTER K PRITCHETT & 907 NW 2ND ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.945	Nonpriority creditor's name and mailing address LESTER L LONGTON 203 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.946	Nonpriority creditor's name and mailing address LETHA L WORLEY 8626 WASHOE ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.947	Nonpriority creditor's name and mailing address LEWIS A SHERRER & 8200 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.948	Nonpriority creditor's name and mailing address LH VENTURES LLC PO BOX 428 ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.949	Nonpriority creditor's name and mailing address Liberty County Tax Assessor 304 Campbell St Cleveland, TX 77327 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.950	Nonpriority creditor's name and mailing address LINDA EZELL NEWSOME 15021 KATY FREEWAY SUITE 400 HOUSTON, TX 77094 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.951	Nonpriority creditor's name and mailing address LINDA EZELL NEWSOME 15021 KATY FREEWAY SUITE 400 HOUSTON, TX 77094 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.952	Nonpriority creditor's name and mailing address LINDA MCQUISTEN AKA 309 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.953	Nonpriority creditor's name and mailing address LINDA S BONNER & 125 MAGNOLIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc.	Case number (if known)
Name		
3.954	Nonpriority creditor's name and mailing address Linder Oil Company, A Partnership c/o Douglas C Longman Jr Jones Walker P O Drawer 3408 Lafayette, LA 70502 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.955	Nonpriority creditor's name and mailing address LINDSAY L KOVICK A/K/A 3766 VISTA RDG NEW PLYMOUTH, ID 83655-6000 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.956	Nonpriority creditor's name and mailing address LISA DEL RE MARIE 910 GOLDEN AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.957	Nonpriority creditor's name and mailing address LISA L TINGEY FAMILY TRUST UTA 8018 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.958	Nonpriority creditor's name and mailing address Litel Explorations LLC c/o Talbot Carmouche & Marcello 17405 Perkins Road Baton Rouge, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.959	Nonpriority creditor's name and mailing address LLOG EXPLORATION & PRODUCTION COMPANY, L 600 Jefferson st. Ste. 1600 Lafayette, LA 70502 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.960	Nonpriority creditor's name and mailing address LLOYD M LEWIS 15021 KATY FREEWAY SUITE 400 HOUSTON, TX 77094 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc.	Case number (if known)	
	Name		
3.961	Nonpriority creditor's name and mailing address Loana R. Kirk c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.962	Nonpriority creditor's name and mailing address LOIS L ROYSTON 8543 WASHOE ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.963	Nonpriority creditor's name and mailing address LOIS VON MORGANROTH 1223 MONTANA AVE SANTA MONICA, CA 90403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.964	Nonpriority creditor's name and mailing address LOLITA N BAILEY 2617 N WHITLEY DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.965	Nonpriority creditor's name and mailing address LONNIE RAJKOVICH 2609 WINESAP AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.966	Nonpriority creditor's name and mailing address LORI A ARNOLD 1300 ASPEN DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.967	Nonpriority creditor's name and mailing address LORI D BIEKER 2606 ROME AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor High Mesa, Inc. Name		Case number (if known)	
3.968	Nonpriority creditor's name and mailing address LORI DELEHANT 2901 DOGWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.969	Nonpriority creditor's name and mailing address LOUIS J. SCOTT, JR. C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.970	Nonpriority creditor's name and mailing address LOUIS M HIGBY & 2403 KILLEBREW DRIVE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.971	Nonpriority creditor's name and mailing address LOUISE HOUSTON 2210 SHAMROCK FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.972	Nonpriority creditor's name and mailing address Louisiana Department of Natural Resource c/o Megan K. Terrell Louisiana Department of Justice (94005) P. O. Box 94005 Baton Rouge, LA 70804-9005 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.973	Nonpriority creditor's name and mailing address Louisiana Department Of Revenue 617 3rd St Baton Rouge, LA 70802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.974	Nonpriority creditor's name and mailing address LOUISIANA DEPT OF NATURAL RES PO BOX 44277 BATON ROUGE, LA 70804-4277 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,624.48

Debtor	Name	Case number (if known)
High Mesa, Inc.		
3.975	Nonpriority creditor's name and mailing address Louisiana Energy Production L L C c/o Paul J Hebert Ottinger Hebert P O Drawer 52606 Lafayette, LA 70505-2606 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.976	Nonpriority creditor's name and mailing address LOUISIANA EXPLORATION & ACQUISITIONS ET Confidential Confidential Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.977	Nonpriority creditor's name and mailing address LOUISIANA LAND & EXPL CO C/O CONOCO PHILLIPS 21873 NETWORK PLACE CHICAGO, IL 60673-1218 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.978	Nonpriority creditor's name and mailing address Louisiana Land & Exploration Co L L C c/o Deborah DeRoche Kuchler Kuchler Polk Weiner, LLC 1615 Poydras St. Suite 1300 New Orleans, LA 70112 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.979	Nonpriority creditor's name and mailing address LOUISIANA ONSHORE PROPERTIES LLC 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.980	Nonpriority creditor's name and mailing address Louisiana Secretary of State Commercial Division PO Box 94125 Baton Rouge, LA 70804-9125 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.981	Nonpriority creditor's name and mailing address LOWELL D DAVIS 8407 WASHOE RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.982	Nonpriority creditor's name and mailing address LOWER PAYETTE DITCH CO 102 N MAIN ST PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.983	Nonpriority creditor's name and mailing address LUIS JUAREZ & 980 SHAMROCK CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.984	Nonpriority creditor's name and mailing address LUKE A SMITH 2132 MAPLE CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.985	Nonpriority creditor's name and mailing address LW SATHER & GLENDA SATHER 373 NE 4TH AVE ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.986	Nonpriority creditor's name and mailing address LYLE D ANDERSON & 1723 WEST SANDALWOOD DRIVE MERIDIAN, ID 83646 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.987	Nonpriority creditor's name and mailing address LYLE MARTIN YOUNGBERG 1004 VICTORIA DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.988	Nonpriority creditor's name and mailing address LYNN H STONE & 2306 SHAMROCK CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.989	Nonpriority creditor's name and mailing address LYNN LARSEN & 1770 NW 24TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.990	Nonpriority creditor's name and mailing address LYNNORA JEAN GROSS 2302 SHAMROCK CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.991	Nonpriority creditor's name and mailing address LYONS PETROLEUM, INC 400 Travis Street Shreveport, LA 71101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.992	Nonpriority creditor's name and mailing address M & L INDUSTRIES 1210 ST CHARLES HOUMA, LA 70360 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$863.95
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3.993	Nonpriority creditor's name and mailing address MAGUIRE OIL COMPANY 5950 Berkshire Ln Dallas, TX 75225 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.994	Nonpriority creditor's name and mailing address MAIL FINANCE DEPT 3682 PO BOX 123682 DALLAS, TX 75312-3682 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$308.75
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3.995	Nonpriority creditor's name and mailing address MAIN PASS 301 #A-6 OCS-G 04486 n/a n/a, n/a n/a Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Name	Case number (if known)
	High Mesa, Inc.	
3.996	Nonpriority creditor's name and mailing address MAIN PASS 301 B-2 OCS-G 1317 n/a n/a, n/a n/a Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.997	Nonpriority creditor's name and mailing address MAIN PASS 301 PROSPECT FILE n/a n/a, n/a n/a Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.998	Nonpriority creditor's name and mailing address MALCOLM R HARRIS 8301 WASHOE RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.999	Nonpriority creditor's name and mailing address Malheur County Assessor 251 B St W Vale, OR 97918 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.100 0	Nonpriority creditor's name and mailing address MANTI EXPLORATION OPERATING LLC 8550 United Plaza Building II Suite 305 Baton Rouge, LA 70809 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.100 1	Nonpriority creditor's name and mailing address MANTI GODZILLA, LTD. 800 North Shoreline Boulevard Suite 900 Corpus Christi, TX 78401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.100 2	Nonpriority creditor's name and mailing address MANTI OPERATING COMPANY 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.100 3	Nonpriority creditor's name and mailing address MANTI RESOURCES, INC 21245 Smith Road Covington, LA 70435 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.100 4	Nonpriority creditor's name and mailing address MANUEL ARNOUVILLE C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.100 5	Nonpriority creditor's name and mailing address MANUEL C JOSEPH PO BOX 211 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.100 6	Nonpriority creditor's name and mailing address MAP ENTERPRISES LLC 3085 NW 3RD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.100 7	Nonpriority creditor's name and mailing address MARC D WARD & 2089 TIMBERCREEK DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.100 8	Nonpriority creditor's name and mailing address MARC F FRENCH & 1051 NW 23RD ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.100 9	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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Marcia R Roland
c/o Fisher Rainey Hudson
953 W Bannock St Suite 630
Boise, ID 83702

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Date(s) debt was incurred _

Basis for the claim: **Litigation - Multiple claimants \$500,000 Claim**

Last 4 digits of account number _

Is the claim subject to offset? ☒ No ☐ Yes

3.101 0	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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MARCUS CHRISTIAN HARDEE & DAVIES
LLP
737 N 7th St
Boise, ID 83702

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Date(s) debt was incurred _

Basis for the claim: _

Last 4 digits of account number _

Is the claim subject to offset? ☒ No ☐ Yes

3.101 1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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MARGARET LIVINGSTON
7601 ELMORE ROAD
FRUITLAND, ID 83619

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Date(s) debt was incurred _

Basis for the claim: **Royalty Interest**

Last 4 digits of account number _

Is the claim subject to offset? ☒ No ☐ Yes

3.101 2	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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MARIA CARMEN GONZALEZ
1512 NW 20TH ST
FRUITLAND, ID 83619

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Date(s) debt was incurred _

Basis for the claim: **Royalty Interest**

Last 4 digits of account number _

Is the claim subject to offset? ☒ No ☐ Yes

3.101 3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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MARIA R GONZALEZ &
1506 NW 20TH ST
FRUITLAND, ID 83619

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Date(s) debt was incurred _

Basis for the claim: **Royalty Interest**

Last 4 digits of account number _

Is the claim subject to offset? ☒ No ☐ Yes

3.101 4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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MARIE EILERS
4623 SE 1ST AVENUE
NEW PLYMOUTH, ID 83655

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Date(s) debt was incurred _

Basis for the claim: **Royalty Interest**

Last 4 digits of account number _

Is the claim subject to offset? ☒ No ☐ Yes

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.101 5	Nonpriority creditor's name and mailing address MARIE L BOYER 8660 WASHOE RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.101 6	Nonpriority creditor's name and mailing address MARILYN DICKERSON & 2602 APPLEWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.101 7	Nonpriority creditor's name and mailing address MARILYN LEIGH MAULE BARRECA & 14526 CHESAPEAKE PLACE NE BAINBRIDGE ISLAND, WA 98110 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.101 8	Nonpriority creditor's name and mailing address MARIO MORALES & 1415 N 15TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.101 9	Nonpriority creditor's name and mailing address MARION MCKINLEY, IV. C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.102 0	Nonpriority creditor's name and mailing address MARJEAN RANICE SILVERNAIL 29805 164TH AVENUE KENT, WA 98042 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.102 1	Nonpriority creditor's name and mailing address MARK A YOKOM & 8875 WASHOE RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.102 2	Nonpriority creditor's name and mailing address MARK J RAWLINGS & 7280 CUSTER RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.102 3	Nonpriority creditor's name and mailing address MARK SCHROEDER & 26924 BIRDAVEN COURT WILDER, ID 83676 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.102 4	Nonpriority creditor's name and mailing address MARLENE M DAESELEER 1545 NW 26ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.102 5	Nonpriority creditor's name and mailing address MARLIN & LEORA CASTEEL TRUST 105 NW 9TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.102 6	Nonpriority creditor's name and mailing address MARLIN OLTMAN 4600 HIGHWAY 52 ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.102 7	Nonpriority creditor's name and mailing address MARLOW H TRICK & 1025 NW 22ND ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.102 8	Nonpriority creditor's name and mailing address MARSHALL JOHNSON P.O. BOX 804 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.102 9	Nonpriority creditor's name and mailing address MARSHLAND EQUIPMENT RENTALS 9545 WARD LINE RD BELL CITY, LA 70630 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.103 0	Nonpriority creditor's name and mailing address MARTIN C NUNEZ & 2148 MAPLE CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.103 1	Nonpriority creditor's name and mailing address MARTIN EVANS 2131 S TWIN RAPID WAY BOISE, ID 83709 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.103 2	Nonpriority creditor's name and mailing address MARTIN FLOYD EVANS & 2131 S TWIN RAPID WAY BOISE, ID 83709 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.103 3	Nonpriority creditor's name and mailing address MARTIN J ZAVALA & PO BOX 689 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.103 4	Nonpriority creditor's name and mailing address MARTIN M GARCIA 1022 NW 22ND ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.103 5	Nonpriority creditor's name and mailing address MARTIN PENA 211 CRIMSON CIRCLE WEST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.103 6	Nonpriority creditor's name and mailing address MARTINA JARAMILLO INDIV & AS 2136 NE 16TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.103 7	Nonpriority creditor's name and mailing address MARVIN A SCHNABEL 1040 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.103 8	Nonpriority creditor's name and mailing address MARVIN W HOLM & 3250 NW 2 1/2 AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.103 9	Nonpriority creditor's name and mailing address MARY A VEATCH 917 BOBWHITE ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.104 0	Nonpriority creditor's name and mailing address MARY DARLEEN ALTIZER PO BOX 515 PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.104 1	Nonpriority creditor's name and mailing address MARY HANKEY AS TRUSTEE UNDER THE LAST WI Confidential Confidential, Confidential Confidential Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.104 2	Nonpriority creditor's name and mailing address MARY J MURPHY 1301 NW 19TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.104 3	Nonpriority creditor's name and mailing address MARY JANE MOHN 287 COOPER LANE HAMILTON, MT 59840 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.104 4	Nonpriority creditor's name and mailing address MARY JOSEPIDNE BUQUOI PRIMEAUX C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUTE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.104 5	Nonpriority creditor's name and mailing address MASTER VALVE & WELLHEAD SVC PO BOX 41047 BATON ROUGE, LA 70835 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$40,302.67
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Debtor **High Mesa, Inc.**

Name

Case number (if known)

3.104 6	Nonpriority creditor's name and mailing address Matrix Petroleum LLC Attn J Todd Reeves 1401 Enclave Parkway Suite 400 Houston, TX 77077 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.104 7	Nonpriority creditor's name and mailing address MATTHEW DONALD MCLEAN & 1011 BRAEBURN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.104 8	Nonpriority creditor's name and mailing address MATTHEW ZENG 1005 BRAEBURN FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.104 9	Nonpriority creditor's name and mailing address MAVIS FELICIEN 5713 POPLAR COMMON FREMONT, CA 94583 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.105 0	Nonpriority creditor's name and mailing address MAX A GARDNER & 7244 BOISE ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.105 1	Nonpriority creditor's name and mailing address McConnell & Scully c/o Schaeffer Law Offices Attn Aaron A. Bartell 206 S. Kalamazoo Ave Marshall, MI 49068-1582 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.105 2	Nonpriority creditor's name and mailing address MCCONNELL & SCULLY INC 145 WEST MAIN STREET HOMER, MI 49245 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$41,671.00
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3.105 3	Nonpriority creditor's name and mailing address McMoRan Oil & Gas L L C c/o Carl David Rosenblum Jones Walker 201 St Charles Ave Ste 5100 New Orleans, LA 70170 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.105 4	Nonpriority creditor's name and mailing address MEAD FAMILY TRUST 2006 2690 BAYBERRY DR FRUITLAND, ID 83619-5046 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.105 5	Nonpriority creditor's name and mailing address MEI YING ZHOU 2500 GOLDEN AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.105 6	Nonpriority creditor's name and mailing address MELINDA RAINWATER 1906 ARCADIA DR SUGAR LAND, TX 77498 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,650.00
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3.105 7	Nonpriority creditor's name and mailing address MELODY SUE COFFEY Confidential Confidential Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.105 8	Nonpriority creditor's name and mailing address MELVIN CURTIS 1325 EAST LOCUST ST EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.105 9	Nonpriority creditor's name and mailing address MELVIN G RAASCH & 3520 JACKSON AVENUE EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.106 0	Nonpriority creditor's name and mailing address MELVIN N SESSIONS 2291 NE 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.106 1	Nonpriority creditor's name and mailing address Meridian c/o Guy E. Wall Wall, Bullington, & Cook, LLC 540 Elmwood Park Blvd New Orleans, LA 70123 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.106 2	Nonpriority creditor's name and mailing address MERISSA HILLSBERRY 202 NE 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.106 3	Nonpriority creditor's name and mailing address MERIT ENERGY COMPANY LLC C/O THE PRINTICE-HALL CORPORATION SYSTEM 320 SOMERULOS ST. BATON ROUGE, LA 70802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.106 4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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MERLIN D KOEHN
3246 NW 2ND AVENUE
NEW PLYMOUTH, ID 83655

Date(s) debt was incurred _____

Last 4 digits of account number _____

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.106 5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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MERLYN RUTH MAULE ASHBY
118 WELLSPRINGS DRIVE
ONTARIO, OR 97914

Date(s) debt was incurred _____

Last 4 digits of account number _____

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.106 6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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MH Family LLC
c/o Minnie Hughes
11 Oakley Drive
Hammond, LA 70401

Date(s) debt was incurred _____

Last 4 digits of account number _____

☒ Contingent☒ Unliquidated☒ DisputedBasis for the claim: **Litigation**Is the claim subject to offset? ☒ No ☐ Yes

3.106 7	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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MICHAEL BRADLEY IHLI & LINDA
LINDA MARLENE IHLI JNT LIV TR
625 S SCHOOL AVE
KUNA, ID 83634

Date(s) debt was incurred _____

Last 4 digits of account number _____

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.106 8	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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MICHAEL C DAVIS &
1350 N WHITLEY DR
FRUITLAND, ID 83619

Date(s) debt was incurred _____

Last 4 digits of account number _____

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.106 9	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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MICHAEL D BROWNE
7510 UPPER AVENUE
EMMETT, ID 83617

Date(s) debt was incurred _____

Last 4 digits of account number _____

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.107 0	Nonpriority creditor's name and mailing address MICHAEL D ENGLAND 2230 NE 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.107 1	Nonpriority creditor's name and mailing address MICHAEL D LEWIS & 106 WILD ROSE CIRCLE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.107 2	Nonpriority creditor's name and mailing address Michael E. Ellis 16600 Park Row Houston, TX 77084 Date(s) debt was incurred <u>09/13/2019</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.107 3	Nonpriority creditor's name and mailing address MICHAEL F SHOEMAKER & 5250 ADAMS ROAD NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.107 4	Nonpriority creditor's name and mailing address MICHAEL G JACOB 2630 DOGWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.107 5	Nonpriority creditor's name and mailing address Michael H. Lomax c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.107 6	Nonpriority creditor's name and mailing address MICHAEL J BOYER 2816 SPRUCE DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.107 7	Nonpriority creditor's name and mailing address MICHAEL J MAYELL 4550 POST OAK PLACE SUITE 300 HOUSTON, TX 77027 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.107 8	Nonpriority creditor's name and mailing address MICHAEL J ROBERTS PO BOX 22 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.107 9	Nonpriority creditor's name and mailing address MICHAEL J VANDERPOOL & 12636 ALGONQUIN ST NAMPA, ID 83651 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.108 0	Nonpriority creditor's name and mailing address MICHAEL K LOOMIS & 7607 ELMORE ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.108 1	Nonpriority creditor's name and mailing address MICHAEL L PARTIN & 1803 N ALLEN AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.108 2	Nonpriority creditor's name and mailing address MICHAEL L SMITH 500 SYRINGA FALLS COURT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.108 3	Nonpriority creditor's name and mailing address MICHAEL PERSILVER C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.108 4	Nonpriority creditor's name and mailing address MICHAEL R BISHOP 8289 DUTCH LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.108 5	Nonpriority creditor's name and mailing address MICHAEL R SHERMAN 1007 JONATHAN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.108 6	Nonpriority creditor's name and mailing address MICHAEL W HASTRITER & 1955 E OREGON AVE PROVO, UT 84606 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.108 7	Nonpriority creditor's name and mailing address MIGUEL A SALDIVAR 144 BEECH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.108 8	Nonpriority creditor's name and mailing address MIGUEL ANGEL HERRERA 1207 NW 24TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.108 9	Nonpriority creditor's name and mailing address MIGUEL HERRERA & 2355 KILLEBREW DR PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.109 0	Nonpriority creditor's name and mailing address MIGUEL MACHUCA & 1006 NORTHWEST 24TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.109 1	Nonpriority creditor's name and mailing address MILAGRO EXPLORATION LLC ALLEN CENTER, THREE 333 CLAY ST HOUSTON, TX 77010 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.109 2	Nonpriority creditor's name and mailing address MINENE R SMITH 8653 WASHOE ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.109 3	Nonpriority creditor's name and mailing address MINENE R SMITH 8653 WASHOE ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.109 4	Nonpriority creditor's name and mailing address MISSION RESOURCES CORPORATION 1331 LAMAR, SUITE 1455 HOUSTON, TX 77010 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor **High Mesa, Inc.**

Name

Case number (if known)

3.109
5 Nonpriority creditor's name and mailing address **MISTY STOWE**
1304 ASPEN DR
FRUITLAND, ID 83619
Date(s) debt was incurred ____
Last 4 digits of account number ____

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
☒ Contingent
☒ Unliquidated
☐ Disputed
 Basis for the claim: **Royalty Interest**
 Is the claim subject to offset? ☒ No ☐ Yes

3.109
6 Nonpriority creditor's name and mailing address **MOBIL OIL EXPLORATION & PRODUCING SOUTHE**
822 Harding St.
Lafayette, LA 70503
Date(s) debt was incurred ____
Last 4 digits of account number ____

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: **LITIGATION**
 Is the claim subject to offset? ☒ No ☐ Yes

3.109
7 Nonpriority creditor's name and mailing address **Momayezi Ager**
c/o Shelly Sitton
P O Drawer 1617
Livingston, TX 77351
Date(s) debt was incurred ____
Last 4 digits of account number ____

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
☒ Contingent
☒ Unliquidated
☒ Disputed
 Basis for the claim: **Litigation**
 Is the claim subject to offset? ☒ No ☐ Yes

3.109
8 Nonpriority creditor's name and mailing address **MONARCH HOLDING COMPANY LLC**
1710 KIMBERLY RD
TWIN FALLS, ID 83301
Date(s) debt was incurred ____
Last 4 digits of account number ____

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
☒ Contingent
☒ Unliquidated
☐ Disputed
 Basis for the claim: **Royalty Interest**
 Is the claim subject to offset? ☒ No ☐ Yes

3.109
9 Nonpriority creditor's name and mailing address **MONICA S GAFFNEY &**
2136 E 1ST STREET
FRUITLAND, ID 83619
Date(s) debt was incurred ____
Last 4 digits of account number ____

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
☒ Contingent
☒ Unliquidated
☐ Disputed
 Basis for the claim: **Royalty Interest**
 Is the claim subject to offset? ☒ No ☐ Yes

3.110
0 Nonpriority creditor's name and mailing address **MONTY SHORT**
4575 HILLVIEW ROAD
EMMETT, ID 83617
Date(s) debt was incurred ____
Last 4 digits of account number ____

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
☒ Contingent
☒ Unliquidated
☐ Disputed
 Basis for the claim: **Royalty Interest**
 Is the claim subject to offset? ☒ No ☐ Yes

Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.110
1

Nonpriority creditor's name and mailing address

**MOORE CREEK/MOUNT CARMEL
PO BOX 626
JAY, FL 32565**Date(s) debt was incurred 2019

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.***\$407.71**☒ Contingent☒ Unliquidated☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes3.110
2

Nonpriority creditor's name and mailing address

**MORGAN STANLEY ENERGY CAPITAL INC.
2000 WESTCHESTER AVENUE
1ST FLOOR
Purchase, NY 10577**Date(s) debt was incurred 6-02-15

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.***Unknown**☒ Contingent☒ Unliquidated☒ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes3.110
3

Nonpriority creditor's name and mailing address

**Morgan Stanley Energy Capital Inc.
2000 Westchester Avenue, 1st Floor
Purchase, NY 10577**Date(s) debt was incurred 06/03/2015

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.***\$0.00**☒ Contingent☒ Unliquidated☒ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes3.110
4

Nonpriority creditor's name and mailing address

**Mosbacher Energy Co
c/o Robert B McNeal
Liskow & Lewis
701 Poydras St Ste 5000
New Orleans, LA 70139**

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.***Unknown**☒ Contingent☒ Unliquidated☒ DisputedBasis for the claim: LitigationIs the claim subject to offset? ☒ No ☐ Yes3.110
5

Nonpriority creditor's name and mailing address

**MOTION INDUSTRIES INC
PO BOX 504606
ST. LOUIS, MO 63150-4606**

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.***\$675.65**☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim: _____

Is the claim subject to offset? ☒ No ☐ Yes3.110
6

Nonpriority creditor's name and mailing address

**MOUNTAIN WEST IRA INC
10096 W FAIRVIEW AVE STE 160
BOISE, ID 83704**

Date(s) debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.***Unknown**☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: Royalty InterestIs the claim subject to offset? ☒ No ☐ Yes

Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.110 7	Nonpriority creditor's name and mailing address MR MINERAL RIGHTS LLC 3 NORTH 1050 EAST DECLO, ID 83323 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.110 8	Nonpriority creditor's name and mailing address MTBB Acquisition Company, LLC c/o CT Corporation 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.110 9	Nonpriority creditor's name and mailing address MURPHY FAMILY TRUST & THOMAS PO BOX 310 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.111 0	Nonpriority creditor's name and mailing address MYRON J LITTLE 110 NW 4TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.111 1	Nonpriority creditor's name and mailing address NANCY E THURSTON 5152 UMATILLA AVENUE BOISE, ID 83709 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.111 2	Nonpriority creditor's name and mailing address NANCY LEE TAYLOR 32 S TAFFY DR NAMPA, ID 83687 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.111 3	Nonpriority creditor's name and mailing address NATALIE SUE MIO 1604 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.111 4	Nonpriority creditor's name and mailing address NATHAN L WILSON 1560 DOGWOOD CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.111 5	Nonpriority creditor's name and mailing address NATHAN RAWLINSON & 140 SYCAMORE AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.111 6	Nonpriority creditor's name and mailing address NATHAN TAYLOR 824 ASHLAND AVE SANTA MONICA, CA 90405 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.111 7	Nonpriority creditor's name and mailing address NATHANIEL CLAUDIO & 202 NE 12TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.111 8	Nonpriority creditor's name and mailing address NATOMAS NORTH AMERICA, INC. 8550 UNITED PLAZA BLVD. BATON ROUGE, LA 70809 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.111 9	Nonpriority creditor's name and mailing address NAVOR BELTRAN LOPEZ & 1521 NW 17TH FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.112 0	Nonpriority creditor's name and mailing address NEAL P RECKNAGLE & 3346 NW 2ND AVENUE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.112 1	Nonpriority creditor's name and mailing address NEILL J GOODFELLOW & 8156 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.112 2	Nonpriority creditor's name and mailing address NELSON METAL TECHNOLOGY INC 8952 WASHOE RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.112 3	Nonpriority creditor's name and mailing address Nerissa Holmes c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.112 4	Nonpriority creditor's name and mailing address New Mexico Oil Conservation Division District 4 - Santa Fe 1220 South St. Francis Drive Santa Fe, NM 87505 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known)
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3.112 5	Nonpriority creditor's name and mailing address NEWTON H KECK & FERN E KECK 1255 ALLEN AVE SUITE 111 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.112 6	Nonpriority creditor's name and mailing address NEXEO SOLUTIONS LLC 62190 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693-0621 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,742.21
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3.112 7	Nonpriority creditor's name and mailing address NICHOLAS B WILLIAMS & 103 NW 9TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.112 8	Nonpriority creditor's name and mailing address NICK ADAMS 5720 SE 3RD AVENUE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.112 9	Nonpriority creditor's name and mailing address NICK AND JEAN LASNICK TRUST 8022 N PENNSYLVANIA AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.113 0	Nonpriority creditor's name and mailing address NICK MURPHY & 304 WEST 48TH AVE KENNEWICK, WA 99337 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.113 1	Nonpriority creditor's name and mailing address NICKALAS R JANGULA & 2890 SW 3RD AVE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.113 2	Nonpriority creditor's name and mailing address NOAH W BASS MILLER TRUST 4549 EL CARNAL WAY LAS VEGAS, NV 89121 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.113 3	Nonpriority creditor's name and mailing address NOBLE DITCH CO 102 N MAIN PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.113 4	Nonpriority creditor's name and mailing address Noble Energy Inc c/o John Pratt Farnsworth Stone Pigman et al 909 Poydras St Ste 3150 New Orleans, LA 70112-4042 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.113 5	Nonpriority creditor's name and mailing address NOE RAMIREZ 202 EAST OMAHA STREET CALDWELL, ID 83605 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.113 6	Nonpriority creditor's name and mailing address NOLA M HENDON 1513 NW 24TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.113 7	Nonpriority creditor's name and mailing address NOLA S MILLER 4421 CASA RIO DR ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.113 8	Nonpriority creditor's name and mailing address Nolan A. LeBoeuf, et al c/o Talbot, Carmouche & Marcello Attn Donald T Carmouche 17405 Perkins Road Baton Rouge, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.113 9	Nonpriority creditor's name and mailing address NORCO INC PO BOX 413124 SALT LAKE CITY, UT 84141-3124 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$161.12
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3.114 0	Nonpriority creditor's name and mailing address NORMA C WEAVER 3969 N 1300 E BUHL, ID 83316 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.114 1	Nonpriority creditor's name and mailing address NORMAN WESLEY HARP & PO BOX 4234 MCCALL, ID 83638 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.114 2	Nonpriority creditor's name and mailing address NORTHVIEW RANCH 2663 NW 4TH AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.114 3	Nonpriority creditor's name and mailing address NORTHWEST GAS PROCESSING LLC 16600 Park Row, Suite 158 HOUSTON, TX 77084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.114 4	Nonpriority creditor's name and mailing address Northwest Oil Co c/o Deborah D Kuchler Kuchler Polk Weiner 1615 Poydras St Ste 1300 New Orleans, LA 70112 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.114 5	Nonpriority creditor's name and mailing address NYNA PAYNE 2466 SOUTHSLOPE WAY WEST LINN, OR 97068 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.114 6	Nonpriority creditor's name and mailing address O P M I Operating Co c/o Paul J Hebert Ottinger Hebert P O Drawer 52606 Lafayette, LA 70505-2606 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.114 7	Nonpriority creditor's name and mailing address O'BRIEN'S RESPONSE MANAGEMENT DEPT 3599 PO BOX 123599 DALLAS, TX 75312-3599 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,600.00
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3.114 8	Nonpriority creditor's name and mailing address O'Meara, LLC c/o Stephen C. Fortson Bradley, Murchison, Kelly & Shea, LLC 401 Edwards Street Suite 1000 Shreveport, LA 71101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.114 9	Nonpriority creditor's name and mailing address OCS-G 4486 16600 Park Row, Suite 158 HOUSTON, TX 77084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.115 0	Nonpriority creditor's name and mailing address OFFICE DEPOT PO BOX 1413 CHARLOTTE, NC 28201-1413 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$313.34
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3.115 1	Nonpriority creditor's name and mailing address OFFICE OF NATURAL RESOURCES P O BOX 25627 DENVER, CO 80225-0627 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.115 2	Nonpriority creditor's name and mailing address OIL RECOVERY CO INC PO BOX 1803 MOBILE, AL 36633 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,152.00
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3.115 3	Nonpriority creditor's name and mailing address OMEGA WASTE MANAGEMENT INC PO BOX 1377 PATTERSON, LA 70392 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$586.56
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3.115 4	Nonpriority creditor's name and mailing address OMI ENVIRONMENTAL SOLUTIONS PO BOX 932127 ATLANTA, GA 31193-2127 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,031.91
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3.115 5	Nonpriority creditor's name and mailing address ONALEE MANSOR 8610 SHANNON ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.115 6	Nonpriority creditor's name and mailing address Onyx Energy L.L.C. c/o Gregory Thibodeaux 139 James Comeaux Road, #577 Lafayette, LA 70508 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.115 7	Nonpriority creditor's name and mailing address OPPORTUNE LLP 711 LOUISIANA SUITE 3100 HOUSTON, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$335,778.46
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3.115 8	Nonpriority creditor's name and mailing address OREI INC UNKNOWN Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.115 9	Nonpriority creditor's name and mailing address ORLOFSKY MINERAL HOLDINGS 6038 CHERRYRIDGE DR BATON ROUGE, LA 70809 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.116 0	Nonpriority creditor's name and mailing address Orlofsky Mineral Holdings, LLC 6038 Cherryridge Drive Baton Rouge, LA 70809 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Debtor resigned as operator.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.116 1	Nonpriority creditor's name and mailing address OROCO LLC 13170-B CENTRAL AVENUE SE PMB 320 ALBUQUERQUE, NM 87123 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.116 2	Nonpriority creditor's name and mailing address OUTFITTER SATELLITE INC 2727 OLD EML HILL PIKE NASHVILLE, TN 37214 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$270.44
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Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.116 3	Nonpriority creditor's name and mailing address Owens Leandro Anderson Dozier Blanda & Saltzman 2010 Pinhook Rd Lafayette, LA 70508 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.116 4	Nonpriority creditor's name and mailing address OWYHEE County Assessor P.O. Box 128 Murphy, ID 83650 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.116 5	Nonpriority creditor's name and mailing address OXFORD LLC 3214 NORTH UNIVERSITY AVE #104 Provo, UT 84604 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.116 6	Nonpriority creditor's name and mailing address OXY USA INC. 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.116 7	Nonpriority creditor's name and mailing address PACER ENERGY LTD 12600 Hill Country Blvd Bee Cave, TX 78738 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.116 8	Nonpriority creditor's name and mailing address Pacific Enterprises Oil Co (U S A) c/o Guy Earl Wall Wall Bullington & Cook 540 Elmwood Park Blvd New Orleans, LA 70123 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.116 9	Nonpriority creditor's name and mailing address PACIFIC MOBILE STRUCTURES INC PO BOX 24747 SEATTLE, WA 98124-0747 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$820.18
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3.117 0	Nonpriority creditor's name and mailing address PACSEIS 200 Clocktower Pl, Suite D208 Carmel, CA 93923 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.117 1	Nonpriority creditor's name and mailing address PALACE OPERATING COMPANY C/O BJ DUPLANTIS 625 EAST KALISTE SALOOM ROAD SUITE 301 LAFAYETTE, LA 70580 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.117 2	Nonpriority creditor's name and mailing address PAMELA L HOWELL PO BOX 416 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.117 3	Nonpriority creditor's name and mailing address PANEL SPECIALISTS INC PO BOX 4239 HOUMA, LA 70361-4239 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
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3.117 4	Nonpriority creditor's name and mailing address PANHANDLE OILFIELD SERVICE 14000 QUAIL SPRINGS PARKWAY SUITE 300 OKLAHOMA CITY, OK 73134 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,192.22
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.117 5	Nonpriority creditor's name and mailing address PARAMAX ENERGY INC 7700 E Arapahoe Rd Ste 220 Centennial, CO 80112 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.117 6	Nonpriority creditor's name and mailing address PARISH OF IBERVILLE PO DRAWER 231 PLAQUEMINE, LA 70765-0231 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,188.63
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3.117 7	Nonpriority creditor's name and mailing address PATRICIA A MASON 909 N 2ND STREET FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.117 8	Nonpriority creditor's name and mailing address Patricia A. Lewis c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.117 9	Nonpriority creditor's name and mailing address PATRICIA DANIELS 2247 KILLEBREW RD PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.118 0	Nonpriority creditor's name and mailing address PATRICIA KELLY PO BOX 1037 PATAGONIA, AZ 85624 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.118 1	Nonpriority creditor's name and mailing address PATRICIA M STRADLEY 1595 NW 6TH AVE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.118 2	Nonpriority creditor's name and mailing address PATRICK J FLYNN II 1211 LITTLE ROCK ROAD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.118 3	Nonpriority creditor's name and mailing address PATRIOT TUBULAR SERVICES LLC PO BOX 692228 HOUSTON, TX 77269 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,920.47
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3.118 4	Nonpriority creditor's name and mailing address PATSY J LEAVITT 702 NW 3RD STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.118 5	Nonpriority creditor's name and mailing address PATTY FOSTER 109 N KANSAS AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.118 6	Nonpriority creditor's name and mailing address PAUL MOFFAT & 4797 SANDY AVE EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.118 7	Nonpriority creditor's name and mailing address PAULA SMITH P O BOX 350 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.118 8	Nonpriority creditor's name and mailing address PAYETTE COUNTY 1130 3RD AVE N SUITE 104 PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.118 9	Nonpriority creditor's name and mailing address Payette County Assessor 1130 3rd Ave. N. Payette, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.119 0	Nonpriority creditor's name and mailing address PAYETTE VALLEY SUPPLY INC PO BOX 68 NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,089.63
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3.119 1	Nonpriority creditor's name and mailing address PEDRO E CARBAJAL JR & 208 N DAKOTA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.119 2	Nonpriority creditor's name and mailing address PELICAN DEVELOPMENT LLC 2663 NW 4TH AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.119 3	Nonpriority creditor's name and mailing address PELSTAR MECHANICAL SERVICES 1530 ST ETIENNE ROAD BROUSSARD, LA 70518 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,468.77
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Debtor **High Mesa, Inc.**

Name

Case number (if known)

3.119 4	Nonpriority creditor's name and mailing address Penn Enterprises, L.L.C. c/o A. Shelby Easterly, III 142 Del Norte Avenue Denham Springs, LA 70726 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.119 5	Nonpriority creditor's name and mailing address PENN VIRGINIA OIL & GAS 16285 Park Ten PI #500 Houston, TX 77084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.119 6	Nonpriority creditor's name and mailing address PERRY G. PREJEANT C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.119 7	Nonpriority creditor's name and mailing address PETER A SIMMONS & 8042 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.119 8	Nonpriority creditor's name and mailing address PETRO OPERATING COMPANY LP 16600 Park Row, Suite 158 HOUSTON, TX 77084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.119 9	Nonpriority creditor's name and mailing address Petro Quest Exploration, Inc. c/o George W. Grigg 1406 Royal Ave. Monroe, LA 71201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.120 0	Nonpriority creditor's name and mailing address Petro-Hunt L L C c/o J Ralph White White Andrews 650 Poydras St Ste 2319 New Orleans, LA 70130 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.120 1	Nonpriority creditor's name and mailing address Petrohawk Energy Corp c/o Richard Stuart Pabst Kean Miller 909 Poydras St Ste 3600 New Orleans, LA 70112 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.120 2	Nonpriority creditor's name and mailing address PETROHAWK ENERGY CORPORATION 1000 LOUISIANA ST #5600 HOUSTON, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.120 3	Nonpriority creditor's name and mailing address PETROQUEST ENERGY LLC C/O CORPORATION SERVICE COMPANY 320 SOMERULOS ST. BATON ROUGE, LA 70802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.120 4	Nonpriority creditor's name and mailing address Petrosan LLC c/o Benny Miller 17370 Hwy. 101 Iowa, LA 70647 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.120 5	Nonpriority creditor's name and mailing address PHILIP E JOSEPH & P O BOX 211 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc.		Case number (if known)
	Name		

3.120 6	Nonpriority creditor's name and mailing address PHILIP V PITTMAN & 4919 NW 1ST AVENUE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.120 7	Nonpriority creditor's name and mailing address PHILLIP BURK & 2000 COUNTY LINE ROAD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.120 8	Nonpriority creditor's name and mailing address PHILLIP ZUEGER 104 NE 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.120 9	Nonpriority creditor's name and mailing address PHYLLIS ELAINE RICKETTS 8361 DUTCH LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.121 0	Nonpriority creditor's name and mailing address PINNACLE REPROGRAPHICS-DIGITAL 2100 ROSS AVENUE SUITE 830 DALLAS, TX 75201 Date(s) debt was incurred ____ Last 4 digits of account number ____		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,317.44
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3.121 1	Nonpriority creditor's name and mailing address Pioneer Natural Resources U S A Inc c/o Craig Isenberg Barrasso Usdin 909 Poydras St Ste 2350 New Orleans, LA 70112 Date(s) debt was incurred ____ Last 4 digits of account number ____		As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.121 2	Nonpriority creditor's name and mailing address PIONEER WIRELINE SERVICES LLC PO BOX 202567 DALLAS, TX 75320-2567 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$135,513.40
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3.121 3	Nonpriority creditor's name and mailing address Plaquemines Parish Assessor's Office 106 Ave G Belle Chasse, LA 70037 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.121 4	Nonpriority creditor's name and mailing address PLUM COULEE FARM LLC 231 LIVE OAK LN BISMARCK, ND 58504 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.121 5	Nonpriority creditor's name and mailing address PNC Bank, Nat. Assoc., as Agent 500 First Avenue Pittsburgh, PA 15219 Date(s) debt was incurred <u>07/26/2016</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.121 6	Nonpriority creditor's name and mailing address Point Au Fer LLC c/o Talbot Carmouche & Marcello Attn Donald T Carmouche 17405 Perkins Road Baton Rouge, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.121 7	Nonpriority creditor's name and mailing address POLARIS ENTERPRISES, INC 110 Travis Street Suite 131 Lafayette, LA 70503 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.121 8	Nonpriority creditor's name and mailing address PRICEWATERHOUSECOOPERS LLC PO BOX 952282 DALLAS, TX 75395-2282 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$206,792.00
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3.121 9	Nonpriority creditor's name and mailing address PRODUCTION HANDLING AND OPERATING AGREEM n/a n/a, n/a n/a Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.122 0	Nonpriority creditor's name and mailing address Pyramid Midstream LLC 3711 Water Oak Drive Texarkana, AR 71854 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Debtor resigned as operator.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.122 1	Nonpriority creditor's name and mailing address QUAIL COVE HOMEOWNERS ASSOC 917 BOBWHITE STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.122 2	Nonpriority creditor's name and mailing address Quest Exploration L L C c/o Richard Dean McConnell , Jr Kean Miller P O Box 3513 Baton Rouge, LA 70821 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.122 3	Nonpriority creditor's name and mailing address R & L CARRIERS INC PO BOX 10020 PORT WILLIAM, OH 45164-2000 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,657.55
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.122 4	Nonpriority creditor's name and mailing address R & R BROWN INC PO BOX 500 MAGNOLIA, AR 71754-0500 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$20,833.45 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.122 5	Nonpriority creditor's name and mailing address R & R CONTRACTING LLC PO BOX 948 ROBERTSDALE, AL 36567 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$26,143.25 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.122 6	Nonpriority creditor's name and mailing address R SCOTT RODE 2606 APPLEWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.122 7	Nonpriority creditor's name and mailing address R.A.M. DEVELOPMENT LLC 1485 N ELLINGTON PLACE EAGLE, ID 83616 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.122 8	Nonpriority creditor's name and mailing address R360 ENVIRONMENTAL SOLUTIONS PO BOX 671766 DALLAS, TX 75267-1766 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,905.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.122 9	Nonpriority creditor's name and mailing address RACHAEL H HOLTRY 1309 ASPEN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.123 0	Nonpriority creditor's name and mailing address RACHEL S NEILL 7352 CUSTER RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.123 1	Nonpriority creditor's name and mailing address Railroad Commission of Texas 1919 N Loop W #620 Houston, TX 77008 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.123 2	Nonpriority creditor's name and mailing address RAIN FOR RENT FILE 52541 LOS ANGELES, CA 90074-2541 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15.56
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3.123 3	Nonpriority creditor's name and mailing address RALPH L BARKER 900 NW 24TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.123 4	Nonpriority creditor's name and mailing address RAMIRO MONCADA 307 NE 14TH DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.123 5	Nonpriority creditor's name and mailing address RAMONA S BECERRA 1580 NW 26TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.123 6	Nonpriority creditor's name and mailing address RAMOS INVESTMENTS COMPANY C/O WEEKS & GONZALEZ 400 MAGAZINE ST SUITE 200 NEW ORLEANS, LA 70130 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.123 7	Nonpriority creditor's name and mailing address RAMSHORN INVESTMENTS INC 515 W Greens Rd Houston, TX 77067 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.123 8	Nonpriority creditor's name and mailing address Randall C Kauffman c/o Fisher Rainey Hudson 954 W Bannock St Suite 630 Boise, ID 83702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Litigation - Multiple claimants \$500,000 Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.123 9	Nonpriority creditor's name and mailing address RANDALL C KAUFFMAN & 4040 LITTLE WILLOW ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.124 0	Nonpriority creditor's name and mailing address RANDALL G MARTINDALE & 2692 BAYBERRY DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.124 1	Nonpriority creditor's name and mailing address RANDY F BISHOP 725 NORWAY RD CHADDS FORD, PA 19317 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.124 2	Nonpriority creditor's name and mailing address RANDY L BERGQUIST 124 HILL RD WEISER, ID 83672 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.124 3	Nonpriority creditor's name and mailing address RAUL CHAVEZ JR & 1111 NORTH WEST 21ST STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.124 4	Nonpriority creditor's name and mailing address RAUL E MARQUEZ 1003 JONATHAN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.124 5	Nonpriority creditor's name and mailing address RAUL GONZALEZ 1120 NW 23RD ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.124 6	Nonpriority creditor's name and mailing address RAYMOND & BONNIE TURNER 7890 ELMORE ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.124 7	Nonpriority creditor's name and mailing address RAYMOND E HORTON 2106 1ST AVE N PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.124 8	Nonpriority creditor's name and mailing address RCG-R2B LLC PO BOX 220 NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.124 9	Nonpriority creditor's name and mailing address Reagan E Bradford Lanier Law Firm 100 E California Ave Suite 200 Oklahoma City, OK 73104 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation - Multiple claimants \$500,000 Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.125 0	Nonpriority creditor's name and mailing address REAGAN POWER & COMPRESSION INC DEPT AT 952461 ATLANTA, GA 31192-2461 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,632.89
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3.125 1	Nonpriority creditor's name and mailing address REBECCA A ROMANS 2602 ROME AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.125 2	Nonpriority creditor's name and mailing address REBECCA L COWGILL 1315 ASPEN DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.125 3	Nonpriority creditor's name and mailing address REFUGIO J GONZALEZ & PO BOX 933 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.125 4	Nonpriority creditor's name and mailing address REGIONAL VALVE CORP 2900 OLD CHEMSTRAND RD CANTONEMENT, FL 32533 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,987.20
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3.125 5	Nonpriority creditor's name and mailing address REVEAL DATA CORPORATION PO BOX 273 RIVERSIDE, IL 60546 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,625.00
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.125 6	Nonpriority creditor's name and mailing address Rex A. Sharp Rex A Sharp PA 5301 W 75th St Prairie Village, KS 66208 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation - Multiple claimants \$500,000 Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.125 7	Nonpriority creditor's name and mailing address REX E NEWMAN & 3075 NW 3RD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.125 8	Nonpriority creditor's name and mailing address RICE ENTERPRISES, LLC 8052 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.125 9	Nonpriority creditor's name and mailing address RICHARD BERRETH & 1316 ASPEN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.126 0	Nonpriority creditor's name and mailing address RICHARD D & LEAH LYNN CLOW 2950 NW 4TH AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.126 1	Nonpriority creditor's name and mailing address RICHARD D BARBEE P O BOX 390 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.126 2	Nonpriority creditor's name and mailing address RICHARD DARREN TORGERSRUD 655 MONTGOMERY ST #18 SAN FRANCISCO, CA 94111 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.126 3	Nonpriority creditor's name and mailing address RICHARD DOMANGUE C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.126 4	Nonpriority creditor's name and mailing address RICHARD GLEN TAYLOR 30000 KASSON ROAD # 357 TRACY, CA 95304 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.126 5	Nonpriority creditor's name and mailing address RICHARD H PURDUM & 6215 DENVER ROAD NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.126 6	Nonpriority creditor's name and mailing address RICHARD J LZICAR & 7912 ELMORE ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.126 7	Nonpriority creditor's name and mailing address Richard Peterson c/o Fisher Rainey Hudson 958 W Bannock St Suite 630 Boise, ID 83702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation - Multiple claimants \$500,000 Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.126 8	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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RICHARD PETERSON TRUST
9090 HANSON LN
PAYETTE, ID 83661

Date(s) debt was incurred _____

Last 4 digits of account number _____

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.126 9	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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RICHARD R VEST &
2515 NW 4TH AVENUE
FRUITLAND, ID 83619

Date(s) debt was incurred _____

Last 4 digits of account number _____

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.127 0	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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RICHARD T COOK
910 BRAEBURN ST
FRUITLAND, ID 83619

Date(s) debt was incurred _____

Last 4 digits of account number _____

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.127 1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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RICHARD VAUGHN MAULE
1900 ORO DAM BLVD.
E. STE 12
OROVILLE, CA 95966-5934

Date(s) debt was incurred _____

Last 4 digits of account number _____

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.127 2	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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RICHARD WAYNE NICHOLAS &
11845 N 10800 W
TREMONTON, UT 84337

Date(s) debt was incurred _____

Last 4 digits of account number _____

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.127 3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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RICK ADAMS AND KRISTIN C ADAMS
2685 BAYBERRY DR
FRUITLAND, ID 83619

Date(s) debt was incurred _____

Last 4 digits of account number _____

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.127 4	Nonpriority creditor's name and mailing address RICK L REYNOLDS & 7515 ELMORE ROAD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.127 5	Nonpriority creditor's name and mailing address RICK VICK & 201 NW 9TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.127 6	Nonpriority creditor's name and mailing address RICKY LEE ROYSTON 8547 WASHOE RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.127 7	Nonpriority creditor's name and mailing address RILEY J HILL PO BOX 428 ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.127 8	Nonpriority creditor's name and mailing address RIO FUEL AND SUPPLY PO BOX 2588 MORGAN CITY, LA 70381 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,449.25</u>
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3.127 9	Nonpriority creditor's name and mailing address Ripco, LLC c/o Charles G. Blaize, Jr. Mayhall Fondren Blaize, LLC 5800 One Perkins Place Dr. Suite 2-B Baton Rouge, LA 70808 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.128 0	Nonpriority creditor's name and mailing address RITA JEANNE BINGAMAN 17608 CALIENTE PL. CERRITOS, CA 90703 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.128 1	Nonpriority creditor's name and mailing address RITA LOCKNER 1033 ALAMEDA DRIVE ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.128 2	Nonpriority creditor's name and mailing address RIVER RENTAL TOOLS INC 109 DERRICK ROAD BELLE CHASSE, LA 70037 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.128 3	Nonpriority creditor's name and mailing address RIVER ROAD RANCHES LLC 2130 NE 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.128 4	Nonpriority creditor's name and mailing address RIVERFRONT EXPLORATION LLC 109 N 6th St Fort Smith, AR 72901 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.128 5	Nonpriority creditor's name and mailing address ROBERT A GRAHAM 1317 ASPEN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.128 6	Nonpriority creditor's name and mailing address ROBERT A MACKENZIE & 1812 N VISTA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.128 7	Nonpriority creditor's name and mailing address ROBERT B OTIS & 1803 NORTH VISTA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.128 8	Nonpriority creditor's name and mailing address ROBERT C ANDERSON 1012 BRAEBURN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.128 9	Nonpriority creditor's name and mailing address ROBERT C TURNER & 2132 E 1ST ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.129 0	Nonpriority creditor's name and mailing address ROBERT CHARLES TURNER MM SSP 2134 E 1ST STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.129 1	Nonpriority creditor's name and mailing address ROBERT CROCHET C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.129 2	Nonpriority creditor's name and mailing address ROBERT D JANGULA & 1580 NW 6TH PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.129 3	Nonpriority creditor's name and mailing address ROBERT D KRAUSE 2045 SW 2ND AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.129 4	Nonpriority creditor's name and mailing address ROBERT D PEDRACINI & PO BOX 568 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.129 5	Nonpriority creditor's name and mailing address ROBERT E CARTER & 1211 JESSICA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.129 6	Nonpriority creditor's name and mailing address ROBERT G PETERSON III 1484 POPLAR AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.129 7	Nonpriority creditor's name and mailing address ROBERT G SHANNON INDIVIDUALLY 1201 TARA COURT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.129 8	Nonpriority creditor's name and mailing address ROBERT GONZALEZ JUAREZ 102 NE 12TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.129 9	Nonpriority creditor's name and mailing address ROBERT GOODWIN P O BOX 220 NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.130 0	Nonpriority creditor's name and mailing address ROBERT HENGGELE & 2651 SW 3 1/2 AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.130 1	Nonpriority creditor's name and mailing address ROBERT J BIXBY 2133 MAPLE CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.130 2	Nonpriority creditor's name and mailing address ROBERT J BOULA 2808 SPRUCE DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.130 3	Nonpriority creditor's name and mailing address ROBERT K VANDERPOOL 5775 DENVER ROAD NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.130 4	Nonpriority creditor's name and mailing address ROBERT L SIDEROFF JR & 2260 SW 3RD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.130 5	Nonpriority creditor's name and mailing address ROBERT L WELLS & EVELYN G 8700 SHANNON RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.130 6	Nonpriority creditor's name and mailing address ROBERT M DENNIS 392 W HIDDEN MEADOW WAY MIDDLETON, ID 83644 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.130 7	Nonpriority creditor's name and mailing address ROBERT MACKENZIE III & 2604 APPLEWOOD AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.130 8	Nonpriority creditor's name and mailing address ROBERT R FRYE P O BOX 506 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.130 9	Nonpriority creditor's name and mailing address ROBERT ROUNDY & 2150 BISHOP AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.131 0	Nonpriority creditor's name and mailing address ROBERT SCOTT SILVA 2383 KILLEBREW DR PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.131 1	Nonpriority creditor's name and mailing address ROBERT SCOTT SILVA LIVING 2383 KILLEBREW DRIVE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.131 2	Nonpriority creditor's name and mailing address ROBERT TAYLOR PO BOX 1131 CEDAR RIDGE, CA 95924-1131 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.131 3	Nonpriority creditor's name and mailing address ROBERT TAYLOR PO BOX 1131 CEDAR RIDGE, CA 95924-1131 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.131 4	Nonpriority creditor's name and mailing address ROBERT W CROSS 2327 EAST 1ST ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.131 5	Nonpriority creditor's name and mailing address ROBERT WADE DOUGLAS 2737 SPRUCE DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.131 6	Nonpriority creditor's name and mailing address ROBERTA SALMON 1993 TRUST 11420 SCOTCH PINES ROAD PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.131 7	Nonpriority creditor's name and mailing address ROBERTSON COUNTY TAX PO BOX 220 FRANKLIN, TX 77856-0220 Date(s) debt was incurred <u>2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$325.81
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3.131 8	Nonpriority creditor's name and mailing address ROBIN A JOCHEM & 807 VICTORIA AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.131 9	Nonpriority creditor's name and mailing address ROBYN LYNN THOMPSON 27442 CROW ROAD EUGENE, OR 97402 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.132 0	Nonpriority creditor's name and mailing address ROCKING R INVESTMENTS LLC 637 CLAUDE ROAD ONTARIO, OR 97914 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.132 1	Nonpriority creditor's name and mailing address Rodessa Operating Company, Inc. c/o Dawn Garner 211 E. Egan Shreveport, LA 71101 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.132 2	Nonpriority creditor's name and mailing address RODNEY BLAKE SEAMONS 1306 TARA CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.132 3	Nonpriority creditor's name and mailing address RODNEY E MCGEHEE & 2303 SHAMROCK CT. FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.132 4	Nonpriority creditor's name and mailing address ROGELIO LARA 2606 WINESAP AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.132 5	Nonpriority creditor's name and mailing address ROGER A. AND KENNIE LYNN 5450 BUTTE RD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.132 6	Nonpriority creditor's name and mailing address ROGER K MURDOCK Address Unknown Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.132 7	Nonpriority creditor's name and mailing address ROGER L & THELMA L SMITH 8727 MICKELSON LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.132 8	Nonpriority creditor's name and mailing address ROGER L. HEBERT LEGACY ENERGY CORPORATION 445 North Blvd Suite 700 Baton Rouge, LA 70802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.132 9	Nonpriority creditor's name and mailing address Rogers Oil Co c/o Paul J Hebert Ottinger Hebert P O Drawer 52606 Lafayette, LA 70505-2606 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.133 0	Nonpriority creditor's name and mailing address ROHRBACHER FARMING INC 1438 W 12TH ST EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.133 1	Nonpriority creditor's name and mailing address ROLAND M HENRY & 317 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.133 2	Nonpriority creditor's name and mailing address ROLAND PENNINGTON & 1137 SUNSET DRIVE ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.133 3	Nonpriority creditor's name and mailing address ROLAND SUESS 16672 GALLOWAY ROAD CALDWELL, ID 83607 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.133 4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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**ROLAND ZUBEL &
911 BRAEBURN ST
FRUITLAND, ID 83619**

Date(s) debt was incurred _

Last 4 digits of account number _

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.133 5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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**Roman Catholic Church
Archdiocese of New Orleans
c/o Talbot Carmouche & Marcello
17405 Perkins Road
Baton Rouge, LA 70810**

Date(s) debt was incurred _

Last 4 digits of account number _

☒ Contingent☒ Unliquidated☒ DisputedBasis for the claim: **Litigation**Is the claim subject to offset? ☒ No ☐ Yes

3.133 6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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**ROMAN CATHOLIC DIOCESE BOISE
1501 S FEDERAL WAY
BOISE, ID 83619**

Date(s) debt was incurred _

Last 4 digits of account number _

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.133 7	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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**RONALD A HART
4685 SE 1ST AVE
NEW PLYMOUTH, ID 83655**

Date(s) debt was incurred _

Last 4 digits of account number _

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.133 8	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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**RONALD D BLACKBURN &
2133 KILLEBREW DRIVE
PAYETTE, ID 83661**

Date(s) debt was incurred _

Last 4 digits of account number _

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.133 9	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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**RONALD D HENDRICKSON &
7188 BLUFF ROAD
NEW PLYMOUTH, ID 83655**

Date(s) debt was incurred _

Last 4 digits of account number _

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.134 0	Nonpriority creditor's name and mailing address RONALD D SCOTTO 2234 NE 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.134 1	Nonpriority creditor's name and mailing address RONALD GENE BARTON 1623 TIMBER CIRCLE MCCALL, ID 83638 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.134 2	Nonpriority creditor's name and mailing address RONALD L EDWARDS 1081 NORTHWEST 21ST ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.134 3	Nonpriority creditor's name and mailing address RONALD LEE SHIPMAN & 1848 NW 24TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.134 4	Nonpriority creditor's name and mailing address RONALD R HALL 2402 APPLEWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.134 5	Nonpriority creditor's name and mailing address RONALD R ROBERTSON & 1793 WALNUT AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.134 6	Nonpriority creditor's name and mailing address RONALD T MIO 2977 NW 3RD AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.134 7	Nonpriority creditor's name and mailing address RONG FEN DENG 2645 DOGWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.134 8	Nonpriority creditor's name and mailing address RONNIE L WEEKES & PO BOX 223 LETHA, ID 83636 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.134 9	Nonpriority creditor's name and mailing address RONNIE R LEGG 4900 BUTTE ROAD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.135 0	Nonpriority creditor's name and mailing address Roosevelt Shields c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.135 1	Nonpriority creditor's name and mailing address RORY D CLINTON PO BOX 351 PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.135 2	Nonpriority creditor's name and mailing address ROSEMARY C KEELY 1204 CHANEY AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.135 3	Nonpriority creditor's name and mailing address ROSEMARY MAULE DAUBERT 1002 SUNSET COURT LEWISTON, ID 83501 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.135 4	Nonpriority creditor's name and mailing address ROSEWOOD RESOURCES, INC. 2101 Cedar Springs Road Suite 1500 Dallas, TX 75201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.135 5	Nonpriority creditor's name and mailing address ROSEWOOD TRUST COMPANY, LTA 2101 Cedar Springs Road suite 1600 Dallas, TX 75201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.135 6	Nonpriority creditor's name and mailing address ROY A STERNES 8611 DEWEY ROAD EMMIT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.135 7	Nonpriority creditor's name and mailing address ROY M BARNES 2606 SUNSET DRIVE EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.135 8	Nonpriority creditor's name and mailing address ROY M BARNES 2606 SUNSET DRIVE EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.135 9	Nonpriority creditor's name and mailing address ROY N LONG 203 NE 16TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.136 0	Nonpriority creditor's name and mailing address ROY WILLIAM STURM & 5780 HWY 95 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.136 1	Nonpriority creditor's name and mailing address Ruben Lomax c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.136 2	Nonpriority creditor's name and mailing address RUBY KYRK 50 LUNDBERG PLACE WEISER, ID 83672 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.136 3	Nonpriority creditor's name and mailing address RUDY BENECKE 1871 WALNUT AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.136 4	Nonpriority creditor's name and mailing address RUSSELL FREITAG & 1119 NW 19TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.136 5	Nonpriority creditor's name and mailing address RUSSELL L WHITE 1200 CHANEY AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.136 6	Nonpriority creditor's name and mailing address RUSSELL R FREITAG & 1120 NW 19TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.136 7	Nonpriority creditor's name and mailing address RUSSELL SPOTSWOOD 8180 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.136 8	Nonpriority creditor's name and mailing address Ruston - Idaho, LLC 111 Killgore Road Ruston, LA 71270 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Debtor resigned as operator.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.136 9	Nonpriority creditor's name and mailing address RUTH DOMENIGHINI 1437 DOGWOOD CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.137 0	Nonpriority creditor's name and mailing address RYAN LLC PO BOX 848351 DALLAS, TX 75284-8351 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,660.92
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3.137 1	Nonpriority creditor's name and mailing address RYAN M KECK PO BOX 71 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.137 2	Nonpriority creditor's name and mailing address RYAN P HENGGELE & 6415 ELMORE RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.137 3	Nonpriority creditor's name and mailing address RYAN REINS 3154 WESTFIELD DR RIVERSIDE, CA 95203 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.137 4	Nonpriority creditor's name and mailing address RYAN TAYLOR 8127 N SUNDIAL WAY BOISE, ID 83714 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.137 5	Nonpriority creditor's name and mailing address S & S CONSTRUCTION LLC PO BOX 859 FLOMATION, AL 36441 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,528.00
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Debtor **High Mesa, Inc.**

Name

Case number (if known)

3.137 6	Nonpriority creditor's name and mailing address S W E P I L P c/o Russell Keith Jarrett Liskow & Lewis, One Shell Square 701 Poydras St. Suite 5000 New Orleans, LA 70139-5099 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.137 7	Nonpriority creditor's name and mailing address SALVADOR G HERRERA 1408 BURTON AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.137 8	Nonpriority creditor's name and mailing address SAM GALAN & 1804 HEITZ AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.137 9	Nonpriority creditor's name and mailing address SAM R MILLER & 10800 DOBIE RD CALDWELL, ID 83605 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.138 0	Nonpriority creditor's name and mailing address Samson Contour Energy E & P L L C c/o Richard Dean McConnell , Jr Kean Miller P O Box 3513 Baton Rouge, LA 70821 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.138 1	Nonpriority creditor's name and mailing address Samson Resources Co c/o Richard Dean McConnell , Jr Kean Miller P O Box 3513 Baton Rouge, LA 70821 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.138 2	Nonpriority creditor's name and mailing address SAMUEL R DAVIS 8620 SHANNON ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.138 3	Nonpriority creditor's name and mailing address SAN JACINTO Tax Assessor-Collector 111 State Hwy. 150 Room C5 Coldspring, TX 77331 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.138 4	Nonpriority creditor's name and mailing address SANDEFER OIL & GAS, INC 701 Poydras Street Suite 5000 New Orleans, LA 70139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.138 5	Nonpriority creditor's name and mailing address SANDEFER PETROLEUM COMPANY 600 Jefferson Street Suite 300 Houston, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.138 6	Nonpriority creditor's name and mailing address Sandhill Production Inc. c/o James Duck 389 Baker Road Shongaloo, LA 71072 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.138 7	Nonpriority creditor's name and mailing address SANDIE DICKINSON 981 SHAMROCK CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.138 8	Nonpriority creditor's name and mailing address SANDRA B CLASON 106 NE 12TH DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.138 9	Nonpriority creditor's name and mailing address Sandridge Energy Offshore 123 Robert S Kerr Ave Oklahoma City, OK 73102 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Asset Retirement Obligation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.139 0	Nonpriority creditor's name and mailing address SANTA FE BRAUN, INC 1675 South State Street Dover, DE 19901 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.139 1	Nonpriority creditor's name and mailing address SANTA ROSA COUNTY TAX COLLECTOR 6495 CAROLINE STREET STE E MILTON, FL 32570 Date(s) debt was incurred <u>2019</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$81,798.03
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3.139 2	Nonpriority creditor's name and mailing address SARA A SCHMIDT 1206 TARA COURT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.139 3	Nonpriority creditor's name and mailing address SARAH EPPERSON THOMISON 1618 CORIANDER DR APT D COSTA MESA, CA 92626-2447 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.139 4	Nonpriority creditor's name and mailing address SAUL TRISTAN & 1045 NW 23 ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.139 5	Nonpriority creditor's name and mailing address SCHOOL BOARD PROSPECT Confidential Confidential Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.139 6	Nonpriority creditor's name and mailing address SCOTT BATES 1056 NW 23RD ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.139 7	Nonpriority creditor's name and mailing address SCOTT CAMPBELL 2611 APPLEWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.139 8	Nonpriority creditor's name and mailing address SCOTT D BARKER & 6787 BLACK BRIDGE RD NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.139 9	Nonpriority creditor's name and mailing address SCOTT GROSS 5825 HIGHWAY 52 NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.140 0	Nonpriority creditor's name and mailing address SCOTT HORACE AND TIFFANY SMITH POST OFFICE BOX 844 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.140 1	Nonpriority creditor's name and mailing address SCOTT R PIERCE 8188 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.140 2	Nonpriority creditor's name and mailing address SEAN MCELHANEY 211 NORTH DAKOTA FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.140 3	Nonpriority creditor's name and mailing address SECORP INDUSTRIES PO BOX 687 RIDGELAND, MS 39158-0687 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,515.86</u>
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3.140 4	Nonpriority creditor's name and mailing address SEJ LLC Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Debtor resigned as operator.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.140 5	Nonpriority creditor's name and mailing address Seneca Resources Corporation c/o Francis V. Liantonio, Jr. Adams & Reese, LLP, One Shell Square 701 Poydras St. Suite 4500 New Orleans, LA 70139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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Debtor	High Mesa, Inc. Name	Case number (if known) _____
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3.140 6	Nonpriority creditor's name and mailing address SETANTA ENERGY LLC 10260 WESTHEIMER RD STE 310 HOUSTON, TX 77042 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.140 7	Nonpriority creditor's name and mailing address SETTOON TOWING LLC PO BOX 11407 DEPARTMENT 2088 BIRMINGHAM, AL 35246-2088 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$48,506.81
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3.140 8	Nonpriority creditor's name and mailing address SEVEN OAKS DEVELOPMENT LLC PO BOX 804 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.140 9	Nonpriority creditor's name and mailing address SEVEN STATES TIMBERLANDS LLC 654 N State St Jackson, MS 39202-3303 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.141 0	Nonpriority creditor's name and mailing address SHAMROCK ENERGY SOLUTIONS PO BOX 731152 DALLAS, TX 75373-1152 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60,795.16
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3.141 1	Nonpriority creditor's name and mailing address SHANE WELDON BURRUP 2142 NE 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.141 2	Nonpriority creditor's name and mailing address SHARLA SIPES 8550 RABY LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor **High Mesa, Inc.**

Name

Case number (if known)

3.141 3	Nonpriority creditor's name and mailing address SHARON FUSELIER C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.141 4	Nonpriority creditor's name and mailing address SHARON J MOREMAN 15021 KATY FREEWAY SUITE 400 HOUSTON, TX 77094 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.141 5	Nonpriority creditor's name and mailing address SHARON K DRIESSEN 2401 APPLEWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.141 6	Nonpriority creditor's name and mailing address SHARON SMITH MCMICKING 12250 BROOKS ROAD WINDSOR, CA 95492 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.141 7	Nonpriority creditor's name and mailing address SHARON Y MURDOCK Confidential Confidential Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.141 8	Nonpriority creditor's name and mailing address SHAWN C SCHAPPERT & 1012 NW 24TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.141 9	Nonpriority creditor's name and mailing address SHAWN L BUNGER 1380 POPLAR AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.142 0	Nonpriority creditor's name and mailing address SHAWN RICHEY 1005 JONATHAN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.142 1	Nonpriority creditor's name and mailing address SHAWNA LEE BARTUS 1407 BURTON AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.142 2	Nonpriority creditor's name and mailing address Shell Exploration & Production Company 701 Poydras New Orleans, LA 70139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.142 3	Nonpriority creditor's name and mailing address Shell Offshore Inc c/o Russell Keith Jarrett Liskow & Lewis, One Shell Square 701 Poydras St. Suite 5000 New Orleans, LA 70139-5099 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.142 4	Nonpriority creditor's name and mailing address Shell Oil Co c/o Russell Keith Jarrett Liskow & Lewis, One Shell Square 701 Poydras St. Suite 5000 New Orleans, LA 70139-5099 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.142 5	Nonpriority creditor's name and mailing address SHELL OIL COMPANY C/O JOHNSON GRAY MCNAMARA LLC PO BOX 51165 LAFAYETTE, LA 70505 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.142 6	Nonpriority creditor's name and mailing address SHERI E EDWARDS Confidential Confidential Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.142 7	Nonpriority creditor's name and mailing address SHERRY L DUKE 1469 CASCADE ROAD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.142 8	Nonpriority creditor's name and mailing address SHORE ENERGY LP 26 CRESTWOOD DRIVE HOUSTON, TX 77007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.142 9	Nonpriority creditor's name and mailing address Shore Energy, LP 26 Crestwood Dr. Houston, TX 77007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Debtor resigned as operator.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.143 0	Nonpriority creditor's name and mailing address Shoreline Southeast L L C c/o Guy Earl Wall Wall Bullington & Cook 540 Elmwood Park Blvd New Orleans, LA 70123 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.143 1	Nonpriority creditor's name and mailing address SHRED-IT USA PO BOX 13574 NEW YORK, NY 10087-3574 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$686.24 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.143 2	Nonpriority creditor's name and mailing address SIGMA ENERGY VENTURES LLC 2170 Buckthorne Place Suite 240 The Woodlands, TX 77380 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.143 3	Nonpriority creditor's name and mailing address SIGMA/TMRX/PERMIT GEOPHY SURVY 2170 Buckthorne Place Suite 240 The Woodlands, TX 77380 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.143 4	Nonpriority creditor's name and mailing address SILLER FARMS INC 1111 JACKSON AVE EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.143 5	Nonpriority creditor's name and mailing address SMITH & MALEK PLLC 601 E FRONT AVENUE SUITE 304 COEUR D'ALENE, ID 83814 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,255.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.143 6	Nonpriority creditor's name and mailing address SMOKE RANCH LLLLP PO Box 7156 Boise, ID 83707 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.143 7	Nonpriority creditor's name and mailing address SNAKE RIVER OIL & GAS LLC 827 Center Ave Payette, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.143 8	Nonpriority creditor's name and mailing address SNELL & WILMER LLP 400 EAST VAN BUREN STREET STE 1900 PHOENIX, AR 85004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,233.30
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3.143 9	Nonpriority creditor's name and mailing address Source Petroleum, Inc 620, 304 8th Ave SW AB T2P 1C1 Canada Calgary, AB Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.144 0	Nonpriority creditor's name and mailing address South Thornwell Exploration (A limited P c/o Verado Energy, Inc 8144 Walnut Hill Lane, Suite 650 Dallas, LA 75231 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.144 1	Nonpriority creditor's name and mailing address Spanish Lake Restoration c/o Roedel Parsons Koch 8440 Jefferson Hwy Suite 3 Baton Rouge, LA 70809 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.144 2	Nonpriority creditor's name and mailing address SPENCER FORD 8504 WASHOE ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.144 3	Nonpriority creditor's name and mailing address SPENCER H WOOD 421 E CRESTLINE DR BOISE, ID 83702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,250.00
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Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.144 4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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SPENCER WOOD
421 E CRESTLINE DR
BOISE, ID 83702

Date(s) debt was incurred _

Last 4 digits of account number _

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

3.144 5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$22,735.08
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ST BERNARD PARISH
PO BOX 168
CHALMETTE, LA 70043-0168

Date(s) debt was incurred 2019

Last 4 digits of account number _

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

3.144 6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$260,920.46
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ST MARY PARISH SHERIFFS OFFICE
PO BOX 610
PATTERSON, LA 70392-0610

Date(s) debt was incurred _

Last 4 digits of account number _

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

3.144 7	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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St. Bernard Parish Assessor
2118 Jackson Blvd
Chalmette, LA 70043

Date(s) debt was incurred _

Last 4 digits of account number _

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

3.144 8	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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St. Mary Parish Assessor
500 Main St
Franklin, LA 70538

Date(s) debt was incurred _

Last 4 digits of account number _

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

3.144 9	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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STACIE A BULLOCK
2679 BAYBERRY DR
FRUITLAND, ID 83619

Date(s) debt was incurred _

Last 4 digits of account number _

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: Royalty InterestIs the claim subject to offset? ☒ No ☐ Yes

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.145 0	Nonpriority creditor's name and mailing address STANLEY A BROWN 6510 WEST IDAHO BOULEVARD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.145 1	Nonpriority creditor's name and mailing address STANLEY L BROWN & 2798 HANNA AVENUE EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.145 2	Nonpriority creditor's name and mailing address STARSTONE NATIONAL INS CO PO BOX 744289 ATLANTA, GA 30374-4289 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,284.53
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3.145 3	Nonpriority creditor's name and mailing address State of Louisiana c/o Louisiana Department of Justice Attn Ryan M Seidemann 1185 North 3rd St Baton Rouge, LA 70802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.145 4	Nonpriority creditor's name and mailing address STATE OF LOUISIANA PO BOX 2827 617 3RD ST 8TH FLOOR BATON ROUGE, LA 70821-2827 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.145 5	Nonpriority creditor's name and mailing address STATE OF LOUISIANA MINERAL BRD 617 N 3RD ST CAPITOL COMPLEX LASALLE OFFICE BLDG BATON ROUGE, LA 70802 Date(s) debt was incurred <u>2019</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$137,392.02
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.145 6	Nonpriority creditor's name and mailing address STATE OF TX-COMMISSIONER OF GENERAL LAND OFFICE 1700 N CONGRESS AVE AUSTIN, TX 78701 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.145 7	Nonpriority creditor's name and mailing address Stephanie A. Draper c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.145 8	Nonpriority creditor's name and mailing address STEPHANIE STEWART 906 N 22ND BOISE, ID 83702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.145 9	Nonpriority creditor's name and mailing address STEPHEN C THURSTON 112 CULBERTSON COURT GREENWOOD, SC 29649 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.146 0	Nonpriority creditor's name and mailing address STEPHEN L BENNETT 2191 GOSS RIDGE ROAD FREELAND, WA 98249 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.146 1	Nonpriority creditor's name and mailing address STEVE MARTIN & 1200 TARA CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.146 2	Nonpriority creditor's name and mailing address STEVEN ALEXANDER & GAYLE 7421 GRANDE VELLEJO DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.146 3	Nonpriority creditor's name and mailing address STEVEN E HOFF 1187 S ENNS AVE REEDLEY, CA 93654 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.146 4	Nonpriority creditor's name and mailing address STEVEN F KINZER 408 NE 11TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.146 5	Nonpriority creditor's name and mailing address STEVEN FRITTS & 2303 N WHITLEY DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.146 6	Nonpriority creditor's name and mailing address STEVEN K OBRAY & 1023 N PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.146 7	Nonpriority creditor's name and mailing address STEVEN L GETZ Confidential Confidential Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.146 8	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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STEVEN M GREENWOOD
7270 CUSTER ROAD
FRUITLAND, ID 83619

Date(s) debt was incurred _

Last 4 digits of account number _

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.146 9	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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STEWART A HARRIS &
2060 NE 8TH STREET
FRUITLAND, ID 83619

Date(s) debt was incurred _

Last 4 digits of account number _

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.147 0	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$31,390.62
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STOKES & SPIEHLER ONSHORE INC
PO BOX 52006
LAFAYETTE, LA 70505

Date(s) debt was incurred _

Last 4 digits of account number _

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

3.147 1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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Strata Energy Inc
c/o Richard D. McConnell , Jr.
Kean Miller, II City Plaza
400 Convention St. Suite 700 PO Box 3513
Baton Rouge, LA 70802

Date(s) debt was incurred _

Last 4 digits of account number _

☒ Contingent☒ Unliquidated☒ DisputedBasis for the claim: **Litigation**Is the claim subject to offset? ☒ No ☐ Yes

3.147 2	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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STRAW HAT FARM LLC
9995 UPPER AVE
EMMETT, ID 83617

Date(s) debt was incurred _

Last 4 digits of account number _

☒ Contingent☒ Unliquidated☐ DisputedBasis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.147 3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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SU ANN THOMPSON
Address Unknown

Date(s) debt was incurred _

Last 4 digits of account number _

☒ Contingent☒ Unliquidated☐ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.147 4	Nonpriority creditor's name and mailing address SUE HELEN JOLLEY 610 NW 2ND ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.147 5	Nonpriority creditor's name and mailing address Sunrise Land, LLC c/o Shawn Frazer 7520 Perkins Road, Ste. 280 Baton Rouge, LA 70808 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.147 6	Nonpriority creditor's name and mailing address SUPERIOR PROPERTIES LLC PO BOX 2596 EAGLE, ID 83616 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.147 7	Nonpriority creditor's name and mailing address SUSAN EZELL WOODYARD 15021 KATY FREEWAY SUITE 400 HOUSTON, TX 77094 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.147 8	Nonpriority creditor's name and mailing address SUSAN R COFFMAN CLASON 8640 SHANNON RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.147 9	Nonpriority creditor's name and mailing address SUYON WON 14220 PARK ROW DR APT 732 HOUSTON, TX 77084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,000.00
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Debtor	Name	Case number (if known)
High Mesa, Inc.		
3.148 0	<p>Nonpriority creditor's name and mailing address</p> <p>SUZETTE LASATER PO BOX 496 FRUITLAND, ID 83619</p> <p>Date(s) debt was incurred ____</p> <p>Last 4 digits of account number ____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Royalty Interest</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.148 1	<p>Nonpriority creditor's name and mailing address</p> <p>SWEPI LP 320 SOMERULOS ST. BATON ROUTE, LA 70802</p> <p>Date(s) debt was incurred ____</p> <p>Last 4 digits of account number ____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>LITIGATION</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.148 2	<p>Nonpriority creditor's name and mailing address</p> <p>SYDSON ENERGY 4550 POST OAK PLACE SUITE 300 HOUSTON, TX 77027</p> <p>Date(s) debt was incurred ____</p> <p>Last 4 digits of account number ____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.148 3	<p>Nonpriority creditor's name and mailing address</p> <p>Sydson Energy Inc. c/o Joens Gill Porter Crawford & Crawford 6363 Woodway Suite 1100 Houston, TX 77057</p> <p>Date(s) debt was incurred ____</p> <p>Last 4 digits of account number ____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Litigation</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.148 4	<p>Nonpriority creditor's name and mailing address</p> <p>SYLVIA RUSSELL C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810</p> <p>Date(s) debt was incurred ____</p> <p>Last 4 digits of account number ____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>LITIGATION</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.148 5	<p>Nonpriority creditor's name and mailing address</p> <p>SYNERGY LAND GROUP LLC PO BOX 82009 LAFAYETTE, LA 70598</p> <p>Date(s) debt was incurred ____</p> <p>Last 4 digits of account number ____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.148 6	<p>Nonpriority creditor's name and mailing address</p> <p>T BAKER SMITH INC PO BOX 2266 HOUMA, LA 70361</p> <p>Date(s) debt was incurred ____</p> <p>Last 4 digits of account number ____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: ____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.148 7	Nonpriority creditor's name and mailing address T&L TRANSPORT LLC 917 BOBWHITE ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.148 8	Nonpriority creditor's name and mailing address TAD GARRED & 7010 BOISE RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.148 9	Nonpriority creditor's name and mailing address TAM FAMILY REVOCABLE TRUST 1205 TARA CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.149 0	Nonpriority creditor's name and mailing address TAMARA K ESSINGER 1307 ASPEN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.149 1	Nonpriority creditor's name and mailing address TAMI J CORNETT & 2278 NE 16TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.149 2	Nonpriority creditor's name and mailing address TAMMY MEYERS 219 KENNETH RD. NEW IBERIA, LA 70560 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,484.00
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Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.149 3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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TARA THEBO
2603 ROME AVE
FRUITLAND, ID 83619

Date(s) debt was incurred _

Last 4 digits of account number _

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.149 4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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TAUBER EXPLORATION & PRODUCTION CO
55 WAUGH DR
STE 600
HOUSTON, TX 77007

Date(s) debt was incurred _

Last 4 digits of account number _

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

3.149 5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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Tauber Exploration and Production Co.

Date(s) debt was incurred _

Last 4 digits of account number _

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim: **Debtor resigned as operator.**Is the claim subject to offset? ☒ No ☐ Yes

3.149 6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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TD ROCK INC
1033 ALAMEDA DRIVE
ONTARIO, OR 97914

Date(s) debt was incurred _

Last 4 digits of account number _

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.149 7	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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TEDDY A ALLEN SR &
4660 SE 1ST AVE
NEW PLYMOUTH, ID 83655

Date(s) debt was incurred _

Last 4 digits of account number _

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: **Royalty Interest**Is the claim subject to offset? ☒ No ☐ Yes

3.149 8	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Unknown
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Tennessee Gas Pipeline Co L L C
c/o Richard Dean McConnell , Jr
Kean Miller
P O Box 3513
Baton Rouge, LA 70821

Date(s) debt was incurred _

Last 4 digits of account number _

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim: **Litigation**Is the claim subject to offset? ☒ No ☐ Yes

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.149 9	Nonpriority creditor's name and mailing address Tensas Exploration & Production Company, c/o William B. Daniel, IV 5800 One Perkins Place, Suite 8B Baton Rouge, LA 70808 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.150 0	Nonpriority creditor's name and mailing address TENSAS EXPLORATION & PRODUCTION COMPANY, 5800 One Perkins Place Suite 8B Baton Rouge, LA 70808 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.150 1	Nonpriority creditor's name and mailing address Terrebonne Assessor's Office 8026 W Main St #501 Houma, LA 70360 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.150 2	Nonpriority creditor's name and mailing address Terri Semon c/o Fisher Rainey Hudson 960 W Bannock St Suite 630 Boise, ID 83702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation - Multiple claimants \$500,000 Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.150 3	Nonpriority creditor's name and mailing address TERRY ANN AUSTIN 2634 DOGWOOD AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.150 4	Nonpriority creditor's name and mailing address Terry Calongne, L.L.C. c/o Terry Calongne, L.L.C. 302 Apache Road Houma, LA 70360 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.150 5	Nonpriority creditor's name and mailing address TERRY E LAAKSONEN 8525 SHANNON RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.150 6	Nonpriority creditor's name and mailing address TERRY JENNINGS & 2138 BISHOP AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.150 7	Nonpriority creditor's name and mailing address TERRY K HURRLE 1003 NW 24TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.150 8	Nonpriority creditor's name and mailing address TERRY WEBER & 1321 HILLCREST DR VALE, OR 97918 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.150 9	Nonpriority creditor's name and mailing address TEXACO 2000 Westchester Avenue White Plains, NY 10650 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.151 0	Nonpriority creditor's name and mailing address Texas Commission on Environmental Qualit 2309 Gravel Dr Fort Worth, TX 76118 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.151 1	Nonpriority creditor's name and mailing address Texas Comptroller of Public Accounts Lyndon B. Johnson State Office Building 111 East 17th Street Austin, TX 78774 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.151 2	Nonpriority creditor's name and mailing address TEXAS ENERGY ACQUISITIONS LP 16600 Park Row, Suite 158 HOUSTON, TX 77084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.151 3	Nonpriority creditor's name and mailing address Texas Oil Distribution & Development Inc JAR Resource Holdings LP c/o Scofield Gerard Pohorelsky 901 Lakeshore Drive Suite 900 Lake Charles, LA 70601 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.151 4	Nonpriority creditor's name and mailing address TEXAS PACIFIC OIL COMPANY 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.151 5	Nonpriority creditor's name and mailing address Texas Petroleum Investemnt Company RA: Patrick S. Ottinger 1313 W. Pinhook Road Lafayette, LA 70503 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.151 6	Nonpriority creditor's name and mailing address Texas Petroleum Investment Co c/o Paul J Hebert Ottinger Hebert P O Drawer 52606 Lafayette, LA 70505-2606 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.151 7	Nonpriority creditor's name and mailing address Texas Secretary of State PO Box 13697 Austin, TX 78711 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.151 8	Nonpriority creditor's name and mailing address Thana M. Kauffman c/o Fisher Rainey Hudson 955 W Bannock St Suite 630 Boise, ID 83702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation - Multiple claimants \$500,000 Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.151 9	Nonpriority creditor's name and mailing address THE ALICE B SMITH REV LIV TST 19800 SW TOUCHMARK WAY #227 BEND, OR 97702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.152 0	Nonpriority creditor's name and mailing address THE BODY FACTORY LLC 2310 NORTH WHITLEY FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.152 1	Nonpriority creditor's name and mailing address THE ESTATE OF RUTH ROSE WILBERT TEMPLET C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUTE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.152 2	Nonpriority creditor's name and mailing address THE ESTATE OF WILLIAM EDWARD BRYANT THRO C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUTE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.152 3	Nonpriority creditor's name and mailing address THE HILLER COMPANIES INC PO BOX 935434 ATLANTA, GA 31193-5434 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,283.16
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3.152 4	Nonpriority creditor's name and mailing address The Lacassane Company, Inc. c/o Veron Bice Palermo & Wilson LLC Attn Turner D Brumby 721 Kirby Street Lake Charles, LA 70602-2125 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.152 5	Nonpriority creditor's name and mailing address THE LAVINIA PALMER TRUST U/T/A 604 REECE AVE NYSSA, OR 97913 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.152 6	Nonpriority creditor's name and mailing address THE LESLIE CLAIRE ENGLEHORN 7100 S WHITLEY DRIVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.152 7	Nonpriority creditor's name and mailing address THE MERIDIAN RESOURCE & EXPL 15021 KATY FREEWAY SUITE 400 HOUSTON, TX 77094 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.152 8	Nonpriority creditor's name and mailing address THE MERIDIAN RESOURCE & EXPLORATION LLC 3867 Plaza Tower Drive Baton Rouge, LA 70816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.152 9	Nonpriority creditor's name and mailing address THE MERIDIAN RESOURCE & EXPLORATON LLC 701 Poydras st. Ste. 4500 New Orleans, LA 70139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.153 0	Nonpriority creditor's name and mailing address THE MERIDIAN RESOURCE AND EXPLORATIONS L 16600 Park Row Dr Suite 158 Houston, TX 77094 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.153 1	Nonpriority creditor's name and mailing address The Parish of Cameron c/o Talbot Carmouche & Marcello 17405 Perkins Road Baton Rouge, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.153 2	Nonpriority creditor's name and mailing address The Parish of St. Bernard c/o Talbot Carmouche & Marcello 17405 Perkins Road Baton Rouge, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.153 3	Nonpriority creditor's name and mailing address THE PINES TOWNHOMES LLC 917 BOBWHITE ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.153 4	Nonpriority creditor's name and mailing address THE PROSPECT COMPANY PO BOX 1100 EDMOND, OK 73083-1100 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.153 5	Nonpriority creditor's name and mailing address THE RAY BROGAN FAMILY TRUST PO BOX 550 NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.153 6	Nonpriority creditor's name and mailing address THE ROYAL BANK OF SCOTLAND PLC 269 Lord S Southport, PR8 1NY UK Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.153 7	Nonpriority creditor's name and mailing address THE SHIPLEY TRUST 2774 ORCHARD LANE EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.153 8	Nonpriority creditor's name and mailing address THE STRINGER FAMILY TRUST 1600 PARK AVENUE NYSSA, OR 97913 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.153 9	Nonpriority creditor's name and mailing address THEODORE J NEY & 1100 ECHO AVE PARMA, ID 83660 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.154 0	Nonpriority creditor's name and mailing address THERESA A HARVEY 1811 ALLEN AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.154 1	Nonpriority creditor's name and mailing address THERESA ANN UCOVICH 1205 QUAIL RIDGE WAY HOLLISTER, CA 95023 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.154 2	Nonpriority creditor's name and mailing address THOMAS E LANHAM 17777 SWEET-OLA HIGHWAY OLA, ID 83657 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.154 3	Nonpriority creditor's name and mailing address THOMAS E LIMBAUGH PO BOX 426 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.154 4	Nonpriority creditor's name and mailing address THOMAS E SCHAFFER & 2637 DOGWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.154 5	Nonpriority creditor's name and mailing address Thomas F. Harris c/o Megan K. Terrell Louisiana Department of Justice (94005) P. O. Box 94005 Baton Rouge, LA 70804-9005 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.154 6	Nonpriority creditor's name and mailing address THOMAS G ROLAND & 4331 LITTLE WILLOW CREEK RD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.154 7	Nonpriority creditor's name and mailing address Thomas G. Roland c/o Fisher Rainey Hudson 952 W Bannock St Suite 630 Boise, ID 83702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation - Multiple claimants \$500,000 Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.154 8	Nonpriority creditor's name and mailing address THOMAS J & CAROL JO WELLER AS PO BOX 961 PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.154 9	Nonpriority creditor's name and mailing address THOMAS J PALLIS & 7685 ELMORE RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.155 0	Nonpriority creditor's name and mailing address THOMAS J. O'NEILL ATTORNEY AT LAW 1660 Broadway Avenue Pittsburgh,, PA 15216 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.155 1	Nonpriority creditor's name and mailing address THOMAS JAMES & JUDY IRENE PO BOX 310 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.155 2	Nonpriority creditor's name and mailing address THOMAS KUHLMAN 1200 JESSICA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.155 3	Nonpriority creditor's name and mailing address THOMAS LEE WHITE & 8903 WASHOE ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.155 4	Nonpriority creditor's name and mailing address THOMAS LESLIE YOUNG & 2150 NE 16TH STREET FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.155 5	Nonpriority creditor's name and mailing address THOMAS R HAWKINS 2400 APPLEWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.155 6	Nonpriority creditor's name and mailing address THOMAS WORLEY & 8636 WASHOE ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.155 7	Nonpriority creditor's name and mailing address THOMASSON PARTNER ASSOCIATES INC 1410 N High St Denver, CO 80218 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.155 8	Nonpriority creditor's name and mailing address THOMPSON JOINT TRUST 62846 MONTARA DRIVE BEND, OR 97701 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.155 9	Nonpriority creditor's name and mailing address THUNDER EXPLORATION INC. PO Box 541674 Houston, TX 77254 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.156 0	Nonpriority creditor's name and mailing address TIFFANY A PURDY 2724 DOGWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.156 1	Nonpriority creditor's name and mailing address TIM G COOPER 11346 LOWER BENCH ROAD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.156 2	Nonpriority creditor's name and mailing address TIM L SIMKINS 1453 DOGWOOD CT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.156 3	Nonpriority creditor's name and mailing address TIM O'BRIEN & P O BOX 124 LYONS, OR 97358 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.156 4	Nonpriority creditor's name and mailing address TIMOTHY D THOMPSON & 910 NW 2ND ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.156 5	Nonpriority creditor's name and mailing address TIMOTHY E GOSS & 2010 ELKHORN EUGENE, OR 97408 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.156 6	Nonpriority creditor's name and mailing address TIMOTHY J KECK 10201 NE 23RD AVE VANCOVER, WA 98686 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.156 7	Nonpriority creditor's name and mailing address TIMOTHY S CALLENDER TRUSTEE OF EAST FELLY RIM CT BOISE, ID 83716 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.156 8	Nonpriority creditor's name and mailing address TJ SCARBROUGH INC PO BOX 30 2265 HWY 45 SOUTH BUCKATUNNA, MS 39322 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,980.00
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3.156 9	Nonpriority creditor's name and mailing address TODD O BLACKWELL & 227 BEECH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.157 0	Nonpriority creditor's name and mailing address Todd Sydson c/o Timothy W. Cerniglia 4913 Newlands Street Metairie, LA 70006 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.157 1	Nonpriority creditor's name and mailing address TOTAL PETROCHEMICALS USA INC 1201 LOUISIANA ST #1800 HOUSTON, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor **High Mesa, Inc.**

Name

Case number (if known)

3.157
2 Nonpriority creditor's name and mailing address **TRACEY A COOPER SHERMAN**
11433 LOWER BENCH ROAD
EMMETT, ID 83617

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**

☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: **Royalty Interest**

Is the claim subject to offset? ☒ No ☐ Yes

3.157
3 Nonpriority creditor's name and mailing address **TRACY BOYD**
UNKNOWN
LA

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **LITIGATION**

Is the claim subject to offset? ☒ No ☐ Yes

3.157
4 Nonpriority creditor's name and mailing address **TRACY L LAUFER &**
7360 CUSTER RD
FRUITLAND, ID 83619

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**

☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: **Royalty Interest**

Is the claim subject to offset? ☒ No ☐ Yes

3.157
5 Nonpriority creditor's name and mailing address **TRAIL PROPERTIES LLC**
5308 E TRAIL RD
KING HILL, ID 83633

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**

☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: **Royalty Interest**

Is the claim subject to offset? ☒ No ☐ Yes

3.157
6 Nonpriority creditor's name and mailing address **Transco Exploration Company**
c/o Mark Andrew Marionneaux
Kean Miller, II City Plaza
400 Convention St. Suite 700
Baton Rouge, LA 70802

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**

☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim: **Litigation**

Is the claim subject to offset? ☒ No ☐ Yes

3.157
7 Nonpriority creditor's name and mailing address **TRANSTEXAS GAS CORPORATION**
2701 Avenue S St
Dickinson, TX 77539

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.* **Unknown**

☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.157 8	Nonpriority creditor's name and mailing address TRC CONSULTANTS LC 120 DIETERT AVE STE 100 BOERNE, TX 78006 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,438.25 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.157 9	Nonpriority creditor's name and mailing address TREVOR W OLVERA 2610 WINESAP AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.158 0	Nonpriority creditor's name and mailing address TRIDENT USA CORP Address Unknown Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.158 1	Nonpriority creditor's name and mailing address TRUDY MARLENE DEEN 4701 VAN DEUSEN ROAD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.158 2	Nonpriority creditor's name and mailing address TRULA BUTLER 2320 N WHITLEY # 7 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.158 3	Nonpriority creditor's name and mailing address TRUST A OF THE LAWRENCE & 1305 TARA COURT FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.158 4	Nonpriority creditor's name and mailing address TTL INC PO DRAWER 1128 TUSCALOOSA, AL 35403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,552.09 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **High Mesa, Inc.**

Name

Case number (if known)

3.158 5	Nonpriority creditor's name and mailing address TUMLINSON 1 n/a n/a, n/a n/a Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.158 6	Nonpriority creditor's name and mailing address TY A CURTIS INDIV & AS TRUSTEE 2450 HIGHWAY 52 PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.158 7	Nonpriority creditor's name and mailing address TYRONE CHARIS REINS 1311 HEEP RUN BUDA, TX 78610 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.158 8	Nonpriority creditor's name and mailing address TYSON A BAXTER & 506 NW 4TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.158 9	Nonpriority creditor's name and mailing address TYSON B SMITH & 4343 LITTLE WILLOW ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.159 0	Nonpriority creditor's name and mailing address U.S. Department of the Interior 1849 C Street NW Washington, DC 20240 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.159 1	Nonpriority creditor's name and mailing address U.S. Specialty Insurance 801 S. Figueroa St., Suite 700 Los Angeles, CA 90017 Date(s) debt was incurred <u>05/15/2019</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.159 2	Nonpriority creditor's name and mailing address U.S. Specialty Insurance Company c/o Locke Lord LLP Attn Brandon Renken 600 Travis Suite 2800 Houston, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.159 3	Nonpriority creditor's name and mailing address U.S. SPECIALTY INSURANCE INSURANCE COMPANY 801 S. Figueroa St. Suite 700 Los Angeles, CA 90017 Date(s) debt was incurred <u>05/15/2019</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.159 4	Nonpriority creditor's name and mailing address ULYSSES SHORT, JR. C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.159 5	Nonpriority creditor's name and mailing address Union Oil Co of California c/o Pamela R Mascari Kean Miller P O Box 3513 Baton Rouge, LA 70821 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.159 6	Nonpriority creditor's name and mailing address Union Oil Company of California c/o Louis Victor Gregoire , Jr Adams & Reese, LLP, One Shell Square 701 Poydras St. Suite 4500 New Orleans, LA 70139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.159 7	Nonpriority creditor's name and mailing address UNION OILFIELD SUPPLY INC 12 JOHN DYKES ROAD WAYNESBORO, MS 39367 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,636.05 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.159 8	Nonpriority creditor's name and mailing address UNITED SITE SERVICES OF TEXAS PO BOX 660475 DALLAS, TX 75266-0475 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,257.29 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.159 9	Nonpriority creditor's name and mailing address UNITED WORLD ENERGY CORP 2006 AMBASSADOR CAFFERY PKWY LAFAYETTE, LA 70506 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$72,102.65 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.160 0	Nonpriority creditor's name and mailing address Upshur County Tax Assessor Collector s O 2498 W Upshur Ave Gladewater, TX 75647 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.160 1	Nonpriority creditor's name and mailing address US Department of the Interior Bureau of Ocean Energy Management Gulf of Mexico OCS Region 1201 Elmwood Park Blvd New Orleans, LA 70123-2394 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.160 2	Nonpriority creditor's name and mailing address US WATER SERVICES INC PO BOX 851361 MINNEAPOLIS, MN 55485-1361 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,300.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.160 3	Nonpriority creditor's name and mailing address USA COMPRESSION PARTNERS LLC PO BOX 974206 DALLAS, TX 75397-4206 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,811.62 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.160 4	Nonpriority creditor's name and mailing address USOIL CORPORATION 6776 Southwest Freeway, Suite 600 Houston, TX 77074 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.160 5	Nonpriority creditor's name and mailing address VAHAN SIPANTZI & 26972 LOWER PLEASANT RIDGE RD WILDER, ID 83676 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.160 6	Nonpriority creditor's name and mailing address VALENTIN JUAREZ CRUZ 2649 DOGWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.160 7	Nonpriority creditor's name and mailing address VAUGHN W KELLEY, TRUSTEE OF 1835 WEISER RIVER ROAD WEISER, ID 83672 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.160 8	Nonpriority creditor's name and mailing address VELMA FRAZIER AKA 8635 WASHOE ROAD PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.160 9	Nonpriority creditor's name and mailing address VERA MOORE C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.161 0	Nonpriority creditor's name and mailing address Verado Energy, ICN. Brian J. Furlong 8150 N. Central Expressway, Suite 850 Dallas, LA 75203 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.161 1	Nonpriority creditor's name and mailing address VERITRUST CORPORATION 7804 FAIRVIEW RD SUITE 153 CHARLOTTE, NC 28226-4998 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,705.27
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3.161 2	Nonpriority creditor's name and mailing address VERIZON BUSINESS PO BOX 660794 DALLAS, TX 75266-0794 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$484.43
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3.161 3	Nonpriority creditor's name and mailing address VERLINE L. JACOBS C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.161 4	Nonpriority creditor's name and mailing address VERNON E BALL & 2353 NE 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.161 5	Nonpriority creditor's name and mailing address VERNON HAGER 111 PENNSYLVANIA AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.161 6	Nonpriority creditor's name and mailing address VICKY J COX PO BOX 810 FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.161 7	Nonpriority creditor's name and mailing address VINCENT A TALBOTT 1008 JONATHAN ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.161 8	Nonpriority creditor's name and mailing address VIRGINIA L SHELTON TRUST 7993 DUTCH LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.161 9	Nonpriority creditor's name and mailing address Virtex Petroleum Company, L.L.P. c/o James K. Barry Barry Conge Harris 1800 West Loop South Suite 750 Houston, TX 77027 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.162 0	Nonpriority creditor's name and mailing address W&T OFFSHORE 9 Greenway Plaza # 300 Houston, TX 77046 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.162 1	Nonpriority creditor's name and mailing address W. B. HIGDON, JR. C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUTE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.162 2	Nonpriority creditor's name and mailing address W.B. McCartney Oil Company Highway 8 West Jena, LA 71342 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Debtor resigned as operator.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.162 3	Nonpriority creditor's name and mailing address WADI PETROLEUM INC 4355 SYLVANFIELD DR SUITE 200 HOUSTON, TX 77014 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.162 4	Nonpriority creditor's name and mailing address Wadsworth A. Holmes, IV c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.162 5	Nonpriority creditor's name and mailing address WAGNER OIL COMPANY 500 COMMERCE ST #600 FORT WORTH, TX 76102 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.162 6	Nonpriority creditor's name and mailing address WALKER LIVING TRUST 26268 USTICK ROAD WILDER, ID 83676 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.162 7	Nonpriority creditor's name and mailing address WALLACE V BUTLER & 346 SUMMIT LN ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name _____	Case number (if known) _____
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3.162 8	Nonpriority creditor's name and mailing address WALTER L BUTLER 429 NW 16TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.162 9	Nonpriority creditor's name and mailing address WALTER OIL & GAS CORP PO BOX 301007 DALLAS, TX 75303-1007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.163 0	Nonpriority creditor's name and mailing address Walter Oil & Gas Corp 1100 Louisiana St # 200 Houston, TX 77002 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Asset Retirement Obligation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.163 1	Nonpriority creditor's name and mailing address WALTER OIL & GAS CORP PO BOX 301007 DALLAS, TX 75303-1007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.163 2	Nonpriority creditor's name and mailing address WANDA C ERSKINE 106 NE 14TH DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.163 3	Nonpriority creditor's name and mailing address WARREN MURATA & 136 GROVE RD ONTARIO, OR 97914 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.163 4	Nonpriority creditor's name and mailing address WARWICK OIL CORPORATION 1001 Pinhook Road Building 1 Lafayette, LA 70503 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.163 5	Nonpriority creditor's name and mailing address Washington County Tax Assessor-Collector 100 East Main, Suite 100 Brenham, TX 77833 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.163 6	Nonpriority creditor's name and mailing address WASHOE IRRIGATING AND WATER 102 N MAIN ST PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.163 7	Nonpriority creditor's name and mailing address WAUKESHA-PEARCE INDUSTRIES INC PO BOX 204116 DALLAS, TX 75320-4116 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,622.98
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3.163 8	Nonpriority creditor's name and mailing address WAYMAN M. BUCHANAN, INC 745 E. Mulberry Avenue Suite 850 San Antonio, TX 78212 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.163 9	Nonpriority creditor's name and mailing address WAYNE D UEHLIN 1840 UEHLIN DR PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. Name	Case number (if known)
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3.164 0	Nonpriority creditor's name and mailing address WAYNE EVERETT IRVIN 1267 NE 10TH AVE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.164 1	Nonpriority creditor's name and mailing address WEATHERFORD US LP PO BOX 301003 DALLAS, TX 75303-1003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$169,597.39
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3.164 2	Nonpriority creditor's name and mailing address WEBER ENERGY CORPORATION 200 Crescent Ct #1801 Dallas, TX 75201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.164 3	Nonpriority creditor's name and mailing address WEISER-BROWN OIL COMPANY 117 E CALHOUN ST MAGNOLIA, AR 71753-3528 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,815.00
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3.164 4	Nonpriority creditor's name and mailing address WELLS FARGO BANK, N.A., AS ADMIN. AGENT 1525 W. WT HARRIS BLVD Charlotte, NC 28262 Date(s) debt was incurred <u>5-14-10</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.164 5	Nonpriority creditor's name and mailing address Wells Fargo Bank, N.A., As Admin. Agent 1525 W. Wt Harris Blvd. Charlotte, NC 28262 Date(s) debt was incurred <u>1/08/2020</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor	High Mesa, Inc.	Case number (if known)	
	Name		
3.164 6	Nonpriority creditor's name and mailing address WELLS FARGO BANK, N.A., AS ADMIN. AGENT 1525 W. WT HARRIS BLVD. Charlotte, NC 28262 Date(s) debt was incurred <u>5-29-15</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.164 7	Nonpriority creditor's name and mailing address Wells Fargo Bank, N.A., As Admin. Agent 1000 Louisiana St., 9th Floor Houston, TX 77002 Date(s) debt was incurred <u>03/13/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.164 8	Nonpriority creditor's name and mailing address WENDY K ADAMSEN 2244 BISHOP AVE FRUITLAND, ID 83619 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.164 9	Nonpriority creditor's name and mailing address WESTERN STATES EQUIPMENT PO BOX 3805 SEATTLE, WA 98124-3805 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$47.53
3.165 0	Nonpriority creditor's name and mailing address WESTMORELAND GAS LLC PO BOX 470 BRIDGEPORT, WV 26330 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,102.95
3.165 1	Nonpriority creditor's name and mailing address WETLANDS CAMERON PARISH EXPERT ONE GALERIA BLVD SUITE 2100 METAIRIE, LA 70001 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,000.00
3.165 2	Nonpriority creditor's name and mailing address WETLANDS CAMERON PARISH EXPERT ONE GALERIA BLVD SUITE 2100 METAIRIE, LA 70001 Date(s) debt was incurred <u>2019</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,000.00

Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.165 3	Nonpriority creditor's name and mailing address WHITE HORSE SERVICES LLC HC 68 BOX 934 1320 PAISANO ROAD PUERTO DE LUNA, NM 88435 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37,400.95
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3.165 4	Nonpriority creditor's name and mailing address Wilbert L. Crutcher c/o Carver, Darden, Koretzky, Tessier, Finn, Blossman, & Areaux, LLC 1100 Poydras Street, Suite 3100 New Orleans, LA 70163 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.165 5	Nonpriority creditor's name and mailing address WILBUR E BLACK & 2625 SW 7TH AVENUE PARMA, ID 83660 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.165 6	Nonpriority creditor's name and mailing address WILFORD C WEBER & 8550 RABY LANE PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.165 7	Nonpriority creditor's name and mailing address WILFORD CONRAD WEBER & 8550 RABY LANE PAYETTE, ID 83661 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.165 8	Nonpriority creditor's name and mailing address WILFORD L MCCONKEY AKA 8080 ESTATES BLVD FRUITLAND, ID 83619 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.165 9	Nonpriority creditor's name and mailing address WILLIAM B POWER 26721 BASSWOOD AVE RANCHO PALOS VERDES, CA 90275 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.166 0	Nonpriority creditor's name and mailing address WILLIAM C CASSANO & 630 SYRINGA SPRINGS DR FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.166 1	Nonpriority creditor's name and mailing address WILLIAM D ROCKHILL FAMILY 2966 TOM'S CABIN RD EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.166 2	Nonpriority creditor's name and mailing address WILLIAM DEAN REECE & 7236 CUSTER RD FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.166 3	Nonpriority creditor's name and mailing address WILLIAM E SCHLAGER AND FAMILY TRUST 1405 JESSICA AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.166 4	Nonpriority creditor's name and mailing address WILLIAM EARL GUTHRIE C/O TALBO, CARMOUCHE, & MARCELLO 214 W. COMERVIEW PO BOX 759 GONZALES, LA 70707 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.166 5	Nonpriority creditor's name and mailing address WILLIAM ERIC TALBOTT & 1007 NORTHWEST 24TH ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.166 6	Nonpriority creditor's name and mailing address WILLIAM F BROWN 2910 NW 3RD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.166 7	Nonpriority creditor's name and mailing address WILLIAM F BROWN 2910 NW 3RD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.166 8	Nonpriority creditor's name and mailing address WILLIAM GORDON C/O TALBOT, CARMOUCHE, & MARCELLO 17405 PERKINS ROAD BATON ROUGE, LA 70810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.166 9	Nonpriority creditor's name and mailing address WILLIAM O SMITH 1745 ANO NUEVO DR. DIAMOND BAR, CA 91765 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.167 0	Nonpriority creditor's name and mailing address WILLIAM R VANDERPOOL 1223 N 4TH ST PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.167 1	Nonpriority creditor's name and mailing address WILLIAM R. CUMMINGS 4167 SW 2ND AVENUE NEW PLYMOUTH, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.167 2	Nonpriority creditor's name and mailing address WILLIAM RICHARD SMITH & 2450 E 1ST ST FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.167 3	Nonpriority creditor's name and mailing address WILLIAM T AZBILL & 27709 LOWER PLEASANT RIDGE RD WILDER, ID 83676 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.167 4	Nonpriority creditor's name and mailing address WILLIAM V PINKHAM & 8725 MICKELSON LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.167 5	Nonpriority creditor's name and mailing address WILLIAM V PINKHAM & 8725 MICKELSON LANE PAYETTE, ID 83661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.167 6	Nonpriority creditor's name and mailing address WILLIAMS INC PO BOX 460 PATTERSON, LA 70392 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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Debtor **High Mesa, Inc.**

Case number (if known) _____

Name

3.167 7	Nonpriority creditor's name and mailing address WILLIE LAKE 2719 DOGWOOD AVE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.167 8	Nonpriority creditor's name and mailing address WILLKIE FARR & GALLAGHER LLP 787 SVENTH AVENUE NEW YORK, NY 10019 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$291,330.33</u>
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3.167 9	Nonpriority creditor's name and mailing address WILSON FAMILY TRUST 2143 LOCUST WAY FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.168 0	Nonpriority creditor's name and mailing address WILTON L EDDY 20891 HEREFORD AVE BEND, OR 97703 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.168 1	Nonpriority creditor's name and mailing address WINN-MARION BARBER LLC 7084 S REVERE PKWY UNIT A CENTENNIAL, CO 80112 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,644.00</u>
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3.168 2	Nonpriority creditor's name and mailing address WOLFE RUDMAN INDIVIDUALLY 1700 Pacific Ave Dallas, TX 75201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
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3.168 3	Nonpriority creditor's name and mailing address WOMBLE BOND DICKSON (US) LLP PO BOX 601879 CHARLOTTE, NC 28260-1879 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$13,960.21</u>
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Debtor	High Mesa, Inc. <small>Name</small>	Case number (if known) _____
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3.168 4	Nonpriority creditor's name and mailing address WYNN CROSBY OPERATING LTD PO BOX 201888 DALLAS, TX 72320-1888 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,772.35 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.168 5	Nonpriority creditor's name and mailing address WYNN-CROSBY OPERATING LLC PO BOX 201888 DALLAS, TX 72320-1888 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.168 6	Nonpriority creditor's name and mailing address X T O Energy Inc c/o Joe B Norman Liskow & Lewis 701 Poydras St Ste 5000 New Orleans, LA 70139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.168 7	Nonpriority creditor's name and mailing address YAMMMSOFTWARE LLC 2356 BASTROP ST HOUSTON, TX 77004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,513.74 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.168 8	Nonpriority creditor's name and mailing address Yuma Exploration & Production Company, I c/o Francis V. Liantonio , Jr. Adams & Reese, LLP, One Shell Square 701 Poydras St. Suite 4500 New Orleans, LA 70139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.168 9	Nonpriority creditor's name and mailing address Yuma Petroleum Company c/o Francis V. Liantonio , Jr. Adams & Reese, LLP, One Shell Square 701 Poydras St. Suite 4500 New Orleans, LA 70139 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Litigation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	High Mesa, Inc. Name	Case number (if known)
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3.169 0	Nonpriority creditor's name and mailing address ZEALOUS ENERGY SERVICES LLC C/O COUMMUNITY FIRST BANK PO BOX 10610 NEW IBERIA, LA 70562 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$42,948.71
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3.169 1	Nonpriority creditor's name and mailing address ZEB R JERMAN & 2402 GOLDEN AVENUE FRUITLAND, ID 83619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.169 2	Nonpriority creditor's name and mailing address ZENERGY, INC. C/O CT CORPORATION SYSTEM 5615 CORPORATE BLVD, STE 400B BATON ROUGE, LA 70808 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LITIGATION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.169 3	Nonpriority creditor's name and mailing address ZOE OLIVERA 4600 SANDY AVENUE EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.169 4	Nonpriority creditor's name and mailing address ZOE RAINS 4600 SANDY AVENUE EMMETT, ID 83617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Royalty Interest</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Arnold & Porter and Kaye Scholer LLP 777 S. Figueroa St. 44th Floor Los Angeles, CA 90017-5844	Line <u>3.79</u> <input type="checkbox"/> Not listed. Explain ____	—

Debtor High Mesa, Inc. Name		Case number (if known)
	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed? Last 4 digits of account number, if any
4.2	Ashley E. Philen Law Offices of Ashley E. Philen P O Box 11652 New Iberia, LA 70562	Line <u>3.57</u> <input type="checkbox"/> Not listed. Explain _____
4.3	Ashley E. Philen Law Offices of Ashley E. Philen P O Box 11652 New Iberia, LA 70562	Line <u>3.165</u> <input type="checkbox"/> Not listed. Explain _____
4.4	Connick & Connick, LLC 3421 N. Causeway Blvd. Suite 408 Metairie, LA 70002	Line <u>3.1532</u> <input type="checkbox"/> Not listed. Explain _____
4.5	Cossich, Sumich, Parsiola & Taylor, LCC 8397 Highway 23 Suite 100 Belle Chasse, LA 70037	Line <u>3.1532</u> <input type="checkbox"/> Not listed. Explain _____
4.6	John S. DuPont III 1530 E Hwy 30 Gonzales, LA 70737	Line <u>3.817</u> <input type="checkbox"/> Not listed. Explain _____
4.7	Kean Miller (Baton Rouge) II City Plaza 400 Convention St. Suite 700 Baton Rouge, LA 70802	Line <u>3.1596</u> <input type="checkbox"/> Not listed. Explain _____
4.8	Kimberly D Moss Attorney at Law 3 Sugar Creek Center Blvd Suite 146 Sugar Land, TX 77478	Line <u>3.200</u> <input type="checkbox"/> Not listed. Explain _____
4.9	Kimberly D Moss Attorney at Law 3 Sugar Creek Center Blvd Suite 146 Sugar Land, TX 77478	Line <u>3.812</u> <input type="checkbox"/> Not listed. Explain _____
4.10	Kimberly D Moss Attorney at Law 3 Sugar Creek Center Blvd Suite 146 Sugar Land, TX 77478	Line <u>3.939</u> <input type="checkbox"/> Not listed. Explain _____
4.11	Louisiana Department of Justice 1885 N. 3rd Street P.O. Box 94005 Baton Rouge, LA 70804	Line <u>3.732</u> <input type="checkbox"/> Not listed. Explain _____
4.12	McGuire Woods, LLP 201 N. Tryon St. Suite 3000 Charlotte, NC 28202	Line <u>3.1576</u> <input type="checkbox"/> Not listed. Explain _____
4.13	Pendley, Baudin & Coffin, LLP 1515 Poydras Street Suite 1400 New Orleans, LA 70112	Line <u>3.231</u> <input type="checkbox"/> Not listed. Explain _____

Debtor	Name	Case number (if known)
	High Mesa, Inc.	
	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?
		Last 4 digits of account number, if any
4.14	Richard W Ward Jr District Attorney 2312 False River Drive Suite C New Roads, LA 70760	Line <u>3.817</u> <input type="checkbox"/> Not listed. Explain _____
4.15	STATE OF DELAWARE 820 N French St Wilmington, DE 19801	Line <u>2.17</u> <input type="checkbox"/> Not listed. Explain _____
4.16	STATE OF DELAWARE 820 N French St Wilmington, DE 19801	Line <u>2.18</u> <input type="checkbox"/> Not listed. Explain _____
4.17	State of Louisiana (Department of Natura 617 North Third Street Suite 1240 Baton Rouge, LA 70804	Line <u>3.972</u> <input type="checkbox"/> Not listed. Explain _____
4.18	Susman Godfrey, LLP 1000 Louisiana St. Suite 5100 Houston, TX 77002	Line <u>3.231</u> <input type="checkbox"/> Not listed. Explain _____
4.19	Susman Godfrey, LLP (Houston) 1000 Louisiana St. Suite 5100 Houston, TX 77002	Line <u>3.1596</u> <input type="checkbox"/> Not listed. Explain _____
4.20	The Law Offices of Michael C. Ginart, Jr 2114 Paris Rd. Chalmette, LA 70043	Line <u>3.1532</u> <input type="checkbox"/> Not listed. Explain _____
4.21	Tony M Clayton 607 Alexander Avenue Port Allen, LA 70767	Line <u>3.817</u> <input type="checkbox"/> Not listed. Explain _____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**5. Add the amounts of priority and nonpriority unsecured claims.****5a. Total claims from Part 1****5b. Total claims from Part 2****5c. Total of Parts 1 and 2**
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <u>757,593.61</u>
5b. +	\$ <u>66,064,803.19</u>
5c.	\$ <u>66,822,396.80</u>

Fill in this information to identify the case:Debtor name High Mesa, Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.**1. Does the debtor have any executory contracts or unexpired leases?**☒ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

Fill in this information to identify the case:Debtor name High Mesa, Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor*

Name	Mailing Address	Name	Check all schedules that apply:
2.1 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:Debtor name High Mesa, Inc.United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**From 1/01/2020 to **Filing Date****Sources of revenue**

Check all that apply

☒ Operating a business☐ Other _____**Gross revenue**

(before deductions and exclusions)

Unknown**For prior year:**From 1/01/2019 to 12/31/2019☒ Operating a business☐ Other _____Unknown**For year before that:**From 1/01/2018 to 12/31/2018☒ Operating a business☐ Other _____\$1,210,398,918.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue****Gross revenue from****each source**
(before deductions and exclusions)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer***Check all that apply*

Debtor **High Mesa, Inc.**

Case number (if known) _____

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. FIRST Insurance Funding 450 Skokie Blvd, Ste 1000 Northbrook, IL 60062	1/23/2020	\$24,972.72	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. FIRST Insurance Funding 450 Skokie Blvd, Ste 1000 Northbrook, IL 60062	1/23/2020	\$23,864.51	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

Debtor **High Mesa, Inc.**

Case number (if known) _____

☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	Alta Mesa Holdings, L.P. and U.S. Specialty Insurance Company v High Mesa Services, LLC, High Mesa, Inc., High Mesa Holdings, LP and High Mesa Holdings GP, LLC			<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Dates of loss	Value of property lost
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Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☒ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
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12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Debtor **High Mesa, Inc.**

Case number (if known) _____

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
14.1. 15021 Katy Freeway, Suite 400 Houston, TX 77094	To 1/31/2019

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	---	---

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

Debtor **High Mesa, Inc.**

Case number (if known) _____

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. WELLS FARGO BANK, N.A., AS ADMIN. AGENT 1525 W. WT HARRIS BLVD Charlotte, NC 28262	XXXX-5566	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other____		Unknown

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

Debtor **High Mesa, Inc.**

Case number (if known) _____

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.	Dates business existed
25.1. High Mesa Holdings GP, LLC 16600 Park Row, Suite 158 Houston, TX 77084	Member	EIN: 82-3535844	From-To 6/27/2017 - Present
25.2. High Mesa Holdings, LP 16600 Park Row, Suite 158 Houston, TX 77084	Limited Partner	EIN: 82-2011080	From-To 6/28/2017 - Present
25.3. High Mesa Services, LLC 16600 Park Row, Suite 158 Houston, TX 77084	Member	EIN: 35-2520226	From-To 9/30/2014 - Present

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26a.1. Opportune 711 Louisiana Suite 3100 Houston, TX 77002	1/29/2019-1/10/2020
26a.2. Ronald J. Smith, Chief Accounting Officer Alta Mesa Services 15021 Katy Fwy, Suite 400 Houston, TX 77094	2/9/2018-1/31/2019

Debtor **High Mesa, Inc.**

Case number (if known)

Name and address	Date of service From-To
26a.3. Michael A McCabe, Chief Financial Officer Alta Mesa Services 16600 Park Row, Suite 158 Houston, TX 77084	2/9/2018-1/31/2019

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26b.1. Opportune 711 Louisiana Suite 3100 Houston, TX 77002	1/29/2019-1/10/2020

Name and address	Date of service From-To
26b.2. PricewaterhouseCoopers LLP 1000 Louisiana Street Suite 5800 Houston, TX 77002	2/1/2019-Present

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. Opportune 711 Louisiana Suite 3100 Houston, TX 77002	Opportune locked Debtors from accessing their data in BOLO accounting software.
26c.2. PricewaterhouseCoopers LLP 1000 Louisiana Street Suite 5800 Houston, TX 77002	
26c.3. Alta Mesa Services 15021 Katy Freeway, Suite 400 Houston, TX 77094	Debtors books and records prior to 2/1/2019 have not been produced by Alta Mesa Resources other than the aged trial balance which was submitted directly to Opportune in February 2019.

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the
inventory

Date of inventory

The dollar amount and basis (cost, market,
or other basis) of each inventory

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Debtor **High Mesa, Inc.**

Case number (if known)

Name	Address	Position and nature of any interest	% of interest, if any
AM MME Holdings, LP	15021 Katy Freeway, Suite 400 Houston, TX 77094	Common Stock	12.918%
Name	Address	Position and nature of any interest	% of interest, if any
Scott Ricks	16600 Park Row, Suite 158 Houston, TX 77084	Authorized Representative	
Name	Address	Position and nature of any interest	% of interest, if any
Galveston Bay Resources Holdings, LP	15021 Katy Freeway, Suite 400 Houston, TX 77094	Common Stock	0.650%
Name	Address	Position and nature of any interest	% of interest, if any
Petro Acquisitions Holdings, LP	15021 Katy Freeway, Suite 400 Houston, TX 77094	Common Stock	0.903%
Name	Address	Position and nature of any interest	% of interest, if any
Petro Operating Company Holdings, Inc.	15021 Katy Freeway, Suite 400 Houston, TX 77094	Common Stock	0.124%
Name	Address	Position and nature of any interest	% of interest, if any
Harlan H. Chappelle	16600 Park Row, Suite 158 Houston, TX 77084	Common Stock	4.799%
Name	Address	Position and nature of any interest	% of interest, if any
Gene Cole	15021 Katy Freeway, Suite 400 Houston, TX 77094	Common Stock	0.099%
Name	Address	Position and nature of any interest	% of interest, if any
Michael A. McCabe	15021 Katy Freeway, Suite 400 Houston, TX 77094	Common Stock	0.099%
Name	Address	Position and nature of any interest	% of interest, if any
Dale Hayes	15021 Katy Freeway, Suite 400 Houston, TX 77094	Common Stock	0.099%
Name	Address	Position and nature of any interest	% of interest, if any
Mezzanine Partners II Delaware Sub., LLC	HPS Investment Partners, LLC 40 West 57th Street 33rd Floor New York, NY 10019	Common Stock	10.176%
Name	Address	Position and nature of any interest	% of interest, if any
Offshore Mezzanine Partners Master Fund	HPS Investment Partners, LLC 40 West 57th Street 33rd Floor New York, NY 10019	Common Stock	17.454%
Name	Address	Position and nature of any interest	% of interest, if any
Institutional Mezzanine Partners II Sub.	HPS Investment Partners, LLC 40 West 57th Street 33rd Floor New York, NY 10019	Common Stock	1.842%

Debtor **High Mesa, Inc.**

Case number (if known) _____

Name	Address	Position and nature of any interest	% of interest, if any
AP Mezzanine Partners II, L.P.	HPS Investment Partners, LLC 40 West 57th Street 33rd Floor New York, NY 10019	Common Stock	2.132%
The Northwestern Mutual Life Insurance	720 East Wisconsin Avenue Milwaukee, WI 53202	Common Stock	1.781%
The Northwestern Mutual Life Insurance	720 East Wisconsin Avenue Milwaukee, WI 53202	Common Stock	0.214%
Northwestern Mutual Capital Strategic	720 East Wisconsin Avenue Milwaukee, WI 53202	Common Stock	0.144%
KCK-AMIH, Ltd.	DLA Piper LLP (US) 203 LaSalle Street Chicago, IL 60601	Common Stock	3.315%
United Insurance Company of America	One East Wacker Drive, 9th Floor Chicago, IL 60601	Common Stock	0.214%
Jade Real Assets Fund, L.P.	40 West 57th Street 33rd Floor New York, NY 10019	Common Stock	1.012%
BCE-MESA Holdings LLC	1201 Louisiana Street, Suite 3308 Houston, TX 77002	Common Stock	34.936%
BCE-AMH Holdings, LLC	1201 Louisiana Street, Suite 3308 Houston, TX 77002	Common Stock	7.090%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
☐ Yes. Identify below.

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No
☐ Yes. Identify below.

Debtor **High Mesa, Inc.**

Case number (if known) _____

Name and address of recipient

Amount of money or description and value of property

Dates

Reason for providing the value

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☐ No
- ☒ Yes. Identify below.

Name of the parent corporation

High Mesa Holdings, LP

Employer Identification number of the parent corporation

EIN: 82-2011080

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
- ☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the parent corporation

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **January 24, 2020****/s/ Scott Ricks**

Signature of individual signing on behalf of the debtor

Scott Ricks

Printed name

Position or relationship to debtor **Authorized Representative**Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
- ☐ Yes

**United States Bankruptcy Court
Southern District of Texas**

In re High Mesa, Inc.

Debtor(s)

Case No.
Chapter7

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
AM MME Holdings, LP 15021 Katy Freeway, Suite 400 Houston, TX 77094		12.918%	Common Stock
BCE-MESA HOLDINGS LLC 1201 Louisiana Street Suite 3308 Houston, TX 77002		34.936%	Common Stock
Mezzanine Partners II Delaware Sub., LLC HPS Investment Partners, LLC 40 West 57th Street 33rd Floor New York, NY 10019		10.176%	Common Stock
Offshore Mezzanine Partners Master Fund HPS Investment Partners, LLC 40 West 57th Street 33rd Floor New York, NY 10019		17.454%	Common Stock

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Authorized Representative** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date January 24, 2020Signature /s/ Scott Ricks
Scott Ricks

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court
Southern District of Texas**

In re **High Mesa, Inc.**

Debtor(s)

Case No.

Chapter

7

VERIFICATION OF CREDITOR MATRIX

I, the Authorized Representative of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **January 24, 2020**

/s/ Scott Ricks

Scott Ricks/Authorized Representative

Signer/Title

3 & 1 Operating, ICN.
c/o Brandy Kourtney
142 Loviette Lane
DeQuincy, LA 70633

A LEROY ATWOOD
2663 NW 4TH AVENUE
FRUITLAND, ID 83619

AARON J PAHL
1004 JONATHAN ST
FRUITLAND, ID 83619

Ada County Assessors Office
190 E Front St # 107
Boise, ID 83702

ADAM D CLINTON &
1147 NW 22ND STREET
FRUITLAND, ID 83619

ADAMS AND REESE LLP
DEPT 5208
PO BOX 2153
BIRMINGHAM, AL 35287-5208

ADAMS VALVE SERVICE INC
PO BOX 278
BOURG, LA 70343

Aegis Development Company LLC
c/o Patrick S. Ottinger
930 Coolidge Blvd
Lafayette, LA 70503

Aegis Energy, Inc
c/o Stanley B. Blackstone
345 Doucet, #201
Lafayette, LA 70503

AGILE DESIGN COMPANY
POST OFFICE BOX 844
FRUITLAND, ID 83619

Ahmed Najee-Ullah
c/o Carver, Darden, Koretzky, Tessier,
Finn, Blossman, & Areaux, LLC
1100 Poydras Street, Suite 3100
New Orleans, LA 70163

AHNSTED FAMILY 1998 REV TRUST
1255 ALLEN AVENUE
APT 114
FRUITLAND, ID 83619

AIRGAS USA LLC
PO BOX 676015
DALLAS, TX 75267-6015

ALBERT E SMITH &
2137 MAPLE CT
FRUITLAND, ID 83619

ALBERT OTTO REINS
5507A CORK PATH
AUSTIN, TX 78745

ALBERTO M GONZALEZ &
1008 BRAEBURN ST
FRUITLAND, ID 83619

Alden L. Kirk
c/o Carver, Darden, Koretzky, Tessier,
Finn, Blossman, & Areaux, LLC
1100 Poydras Street, Suite 3100
New Orleans, LA 70163

ALFRED & NANCY ROZA REV LV TST
5080 HIGHWAY 72
NEW PLYMOUTH, ID 83655

ALICE M SIMONSON
117 N WRIGHT BLVD
LIBERTY LAKE, WA 99019

ALICIA DARLENE STAUFFER
6014 SOMERSET VALLEY DRIVE
RICHARD, TX 77407

ALICIA HERRERA
1303 ASPEN ST
FRUITLAND, ID 83619

ALLEN H SOLTERBECK &
8850 SOLTERBECK LANE
PAYETTE, ID 83661

ALLEN VAN CAMP
2142 LOCUST WAY
FRUITLAND, ID 83619

ALLIANT INSURANCE SERVICES INC
701 B ST
6TH FLOOR
SAN DIEGO, CA 92101

ALMA BERRETH
312 N WASHINGTON AVE
FRUITLAND, ID 83619

ALMAN J MEYER
1502 N PENNSYLVANIA AVE
FRUITLAND, ID 83619

ALTA MESA ENERGY LLC
15021 Katy Fwy #400
Houston, TX 77094

ALTA MESA HOLDINGS LP
3867 Plaza Tower Drive
Baton Rouge, LA 70816

ALVIN SMITH
C/O TALBOT, CARMOUCHE, & MARCELLO
17405 PERKINS ROAD
BATON ROUGE, LA 70810

ALYSSIA M TOMKO
2263 KILLEBREW DRIVE
PAYETTE, ID 83661

AMANDA M TSCHIDA
911 NW 24T ST
FRUITLAND, ID 83619

American Trading & Production Corp
c/o Douglas Conrad Longman , Jr.
Jones Walker
600 Jefferson St. Suite 1600
Lafayette, LA 70501

AMERIPRIDE LINEN & APPAREL
403 MAIN AVE W
TWIN FALLS, ID 83301

Amplify Energy LLC
13907 CARROLLWOOD VILLAGE RUN
TAMPA, FL 33618

AMY J WARNER &
2059 SPRING CREEK DR
FRUITLAND, ID 83619

ANADARKO LAND CORP
1201 LAKE ROBBINS DR
THE WOODLANDS, TX 77380

ANADARKO OGC COMPANY
200 W. Congress
Ste. 900
Lafayette, LA 70505

ANADARKO PETROLEUM CORPORATION
3867 Plaza Tower Drive
Baton Rouge, LA 70816

ANALYTICAL LABORATORIES INC
1804 NORTH 33RD STREET
BOISE, ID 83703-5814

Anderson Exploration Company, Incorporated
c/o Charles R. Anderson
1632 Hodges Street
Lake Charles, LA 70601

ANDRES GARCIA
1335 POPLAR DR
FRUITLAND, ID 83619

ANDREW K EHRLIN
1520 NW 26TH ST
FRUITLAND, ID 83619

ANDREW MURRY &
1007 BRAEBURN ST
FRUITLAND, ID 83619

ANDREW PFEIFFER &
215 CRIMSON CIRCLE EAST
FRUITLAND, ID 83619

ANDREWS COUNTY TAX OFFICE
210 NW 2ND STREET
ANDREWS, TX 79714

Angela R. Crutcher
c/o Carver, Darden, Koretzky, Tessier,
Finn, Blossman, & Areaux, LLC
1100 Poydras Street, Suite 3100
New Orleans, LA 70163

ANITA ZINK
2607 WINESAP AVE
FRUITLAND, ID 83619

ANTHONY E HOWARD
2741 SPRUCE DR
FRUITLAND, ID 83619

ANTHONY O ANDRADE JR
8505 WASHOE RD
PAYETTE, ID 83661

APACHE CORPORATION
3867 Plaza Tower Drive
Baton Rouge, LA 70816

Apache Corporation (of Delaware)
c/o CT Corporation
3867 Plaza Tower Drive
Baton Rouge, LA 70816

Apache Corporation, successor in interes
CT Corp System
3867 Plaza Tower Drive
Baton Rouge, LA 70816

APPLEWOOD ESTATES
POST OFFICE BOX 521
FRUITLAND, ID 83619

ARCADIA OPERATING LLC
DEPT D1810203
PO BOX 650002
DALLAS, TX 75265

ARCHROCK SERVICES
PO BOX 201160
DALLAS, TX 75320-1160

ARDA F HERRERA
809 VICTORIA AVE
FRUITLAND, ID 83619

Ardoin Limited Partnership
c/o Veron Bice Palermo & Wilson LLC
P O Box 2125
Lake Charles, LA 70602-2125

ARDOIN LIMITED PARTNERSHIP
C/O VERON, BICE, PALERMO, & WILSON, LLC
PO BOX 2125
LAKE CHARLES, LA 70602

ARLENE E HOUSER &
601 N PENNSYLVANIA AVE
FRUITLAND, ID 83619

ARMANDO G & KIMI ESTILLORE
2680 BAYBERRY DR
FRUITLAND, ID 83619

Arnold & Porter and Kaye Scholer LLP
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44th Floor
Los Angeles, CA 90017-5844

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WEST 421 RIVERSIDE
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SPOKANE, WA 99201

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c/o Carver, Darden, Koretzky, Tessier,
Finn, Blossman, & Areaux, LLC
1100 Poydras Street, Suite 3100
New Orleans, LA 70163

ARTHUR N LYNCH &
8048 N PENNSYLVANIA AVE
FRUITLAND, ID 83619

ARWYN LARSON
511 WHITETAIL AVE
FRUITLAND, ID 83619-2816

Ascension Parish Assessor's Office
300 Houmas St
Donaldsonville, LA 70346

Ashley E. Philen
Law Offices of Ashley E. Philen
P O Box 11652
New Iberia, LA 70562

Asset Retirement Obligation (estimated)

Asset Retirement Obligation (estimate)

ASSIGNMENT - DIVERSIFIED RESOURCES, INC.
16600 Park Row, Suite 158
HOUSTON, TX 77084

ASSIGNMENT OF OIL AND GAS WORKING INTERE
16600 Park Row, Suite 158
HOUSTON, TX 77084

AT& L ENERGY LLC
Austin Lafferty
220 W Sixth St
Watonga, OK 73772

ATC GROUP SERVICES LLC
DEPT 2630
PO BOX 11407
BIRMINGHAM, AL 35246-2630

ATCHAFALAYA MEASUREMENT INC
PO BOX 677208
DALLAS, TX 75267-7208

Atlanta Guardian Company, LLC
4035 Jefferson Ave.
Texarkana, AR 71854

Atlantic Richfield Company
c/o Liskow & Lewis
One Shell Square
701 Poydras St., Suite 5000
New Orleans, LA 70139-5099

AUDREY CLINTON
9196 PHANTOM CT
MIDDLETON, ID 83644

B A S F Corp
c/o Robert Benn Vincent, Jr
Kean Miller
P O Box 3513
Baton Rouge, LA 70821

B P America Production Co
c/o George Arceneaux, III
Liskow & Lewis
P O Box 52008
Lafayette, LA 70505

B&J FAMILY LLC
P O BOX 706
FRUITLAND, ID 83619

B.E.E.M. OIL AND GAS COMPANY, INC
26619 Oakridge Drive
The Woodlands, TX 77380

BAIRD HANSON WILLIAMS LLP
2117 Hillway Drive
Boise, ID 83702

BAKER HUGHES BUSINESS SUPPORT
PO BOX 301057
DALLAS, TX 75303-1057

BALL'S BOAT RENTAL LLC
1868 DR BEATROUS RD
THERIOT, LA 70397

BALLARD EXPLORATION CO INC
1021 MAIN STREET
SUITE 2310
HOUSTON, TX 77002-6602

Ballard Exploration Co Inc
c/o Michael G Durand
Onebane Law Firm
P O Box 3507
Lafayette, LA 70502-3507

BANDED IRON US INC
PO BOX 51475
LAFAYETTE, LA 70505-1475

Bank One Texas N-Et al
600 Travis Street, Suite 6500
Houston, TX 77002

BARBARA ADY
113 SADDLETREE ROAD
SHAVANO PARK, TX 78231

BARBARA CHAMPION
426 16TH AVENUE NORTH
PAYETTE, ID 83661

BARBARA J CLARK
11110 W AMITY ROAD
BOISE, ID 83709

BARBARA J WILSON
2691 BAYBERRY DRIVE
FRUITLAND, ID 83619

BARBARA L GRIME
217 GIST DR
LIGONIER, PA 15658

BARBARA WILSON
C/O TALBOT, CARMOUCHE, & MARCELLO
17405 PERKINS ROAD
BATON ROUGE, LA 70810

BARRETT RESOURCES
1515 Arapahoe Street Tower 3
Suite 1000
Denver, CO 80202

BASF CORPORATION
400 Convention Street
Suite 700
Baton Rouge, LA 70802

Bay Coquille Inc
c/o Daniel B Stanton
Kean Miller
909 Poydras St Ste 3600
New Orleans, LA 70112

BCE-AMH HOLDINGS LLC
1201 Louisiana Street
Suite 3308
Houston, TX 77002

BCE-MESA HOLDINGS LLC
1201 Louisiana Street
Suite 3308
Houston, TX 77002

BEAU E CLOVER
1341 POPLAR AVE
FRUITLAND, ID 83619

BECK BROS INC
PO BOX 712
BEE COUNTY, TX 78102

BEL OIL CORPORATION
1911 Bel Oil Road
Elton, LA 70532

BENJAMIN L COX
1005 NW 24TH ST
FRUITLAND, ID 83619

BENNY ESLI STEENSON &
1800 HEITZ AVE
FRUITLAND, ID 83619

Bepco, LP
c/o Robert B. McNeal
Liskow & Lewis, One Shell Square
701 Poydras St., Suite 5000
New Orleans, LA 70139-5099

BERNIECE M & HARVEY D EASTON
8172 N PENNSYLVANIA AVE
FRUITLAND, ID 83619

BERT D TORKELSON
7857 ELMORE ROAD
FRUITLAND, ID 83619

BETTY BUCKWALTER MAULE
1840 WILBUR RD
ROSEBURG, OR 97470

BETTY CARVIN
C/O TALBOT, CARMOUCHE, & MARCELLO
17405 PERKINS ROAD
BATON ROUGE, LA 70810

BETTY L. FREEMAN
C/O TALBOT, CARMOUCHE, & MARCELLO
17405 PERKINS ROAD
BATON ROUGE, LA 70810

BEVERLY J ALDRICH
8140 DUTCH LN
PAYETTE, ID 83661

BIG D'S SEAFOOD INC
459 ALICE B ROAD
FRANKLIN, LA 70538

BIG WILLOW CREEK COMPANY
5433 BIG WILLOW ROAD
PAYETTE, ID 83661

Biloxi Marsh Lands Corporation
c/o Timothy W.Cerniglia
4913 Newlands Street
Metairie, LA 70006

BISHOP PROPERTIES, LLC
315 N PENNSYLVANIA AVE
FRUITLAND, ID 83619

BISHOP RANCH HOMEOWNERS ASSOC
P O BOX 859
FRUITLAND, ID 83619

BK CONSTRUCTION LLC
PO BOX 802
FRUITLAND, ID 83619

BLACK CANYON RANCHES, INC
1205 DELMAR AVENUE
PARMA, ID 83660

Black Elk Energy Offshore
11451 Katy Fwy
Houston, TX 77079

BLAINE & TERI MAY FAMILY TRUST
8029 DUTCH LANE
PAYETTE, ID 83661

BLAKENERGY LTD
2211 RAYFORD ROAD
SUITE 111 #40
SPRING, TX 77386

BLAKENERGY OPERATING LLC
2211 RAYFORD ROAD
SUITE 111 #40
SPRING, TX 77386

BLANK ROME LLP
ATTN FINANCE DEPT
ONE LOGAN SQUARE
130 NORTH 18TH STREET
PHILADELPHIA, PA 19103-6998

Blue Shale
c/o Kenneth Miller
Miller Law Offices PLLC
936 E.Park Ave Suite 2
Fairmont, WV 26555

BOB J SNYDER &
1483 POPLAR AVE
FRUITLAND, ID 83619

BOBBIE L. COLLEE
C/O TALBOT, CARMOUCHE, & MARCELLO
17405 PERKINS ROAD
BATON ROUGE, LA 70810

BOBBY J CARBAJAL
2139 BISHOP AVE
FRUITLAND, ID 83619

BOYD C JACKSON &
2638 DOGWOOD AVE
FRUITLAN, ID 83619

BOYD YEE
4393 SILVER LEAF EXT
EMMETT, ID 83617

BP AMERICA INC.
501 WESTLAKE PARK BLVD
HOUSTON, TX 77079

BP AMERICA PRODUCTION COMPANY
225 WESTLAKE PARK BLVD
HOUSTON, TX 77079

BRAD J HOLT
1002 JONATHAN ST
FRUITLAND, ID 83619

BRAD L BARLOW &
2264 NE 16TH ST
FRUITLAND, ID 83619

Brammer Engineering Inc
c/o Daniel B Stanton
Kean Miller
909 Poydras St Ste 3600
New Orleans, LA 70112

BRAZOS COUNTY TAX ASSESSOR
4151 COUNTY PARK CT
BRYAN, TX 77802

BREITBURN OPERATING LP
PO BOX 204662
DALLAS, TX 75320-4662

BRENDA LEE LANGHAM
P O BOX 909
SHEPHERD, TX 77371

BRETT L MOORE &
4988 LITTLE WILLOW ROAD
PAYETTE, ID 83661

Brett L. Moore
c/o Fisher Rainey Hudson
956 W Bannock St Suite 630
Boise, ID 83702

BRIAN D BUFFINGTON
2410 ALDER
FRUITLAND, ID 83619

Brian K. Shields, II
c/o Carver, Darden, Koretzky, Tessier,
Finn, Blossman, & Areaux, LLC
1100 Poydras Street, Suite 3100
New Orleans, LA 70163

BRIAN R VANDEROORD
2729 DOGWOOD AVE
FRUITLAND, ID 83619

BRIDGE ENERGY INC
1580 LINCOLN STREET
SUITE 1110
DENVER, CO 80203

BRIDGE RESOURCES CORP
1580 Lincoln Street
Suite 1110
Denver, CO 80203

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BROCK A GROSDIDIER &
1907 HEITZ AVENUE
FRUITLAND, ID 83619

BROCK KIDDER
203 MIRAMAR BLVD
LAFAYETTE, LA 70508

BROOKS J WARRINGTON
7897 ELMORE ROAD
FRUITLAND, ID 83619

BRUCE A PETERSON &
PO BOX 706
FRUITLAND, ID 83619

BRUCE A WHITE &
2139 MAPLE CT
FRUITLAND, ID 83619

BRUCE E BUCHANAN &
207 NW 9TH STREET
FRUITLAND, ID 83619

BRUCE E FARLEY
7920 ELMORE RD
FRUITLAND, ID 83619

BRUCE J COWGILL &
1009 VICTORIA AVENUE
FRUITLAND, ID 83619

BUFFALO ROCK COMPANY INC
PO BOX 2247
BIRMINGHAM, AL 35202

Bureau of Ocean Energy Management
45600 Woodland Rd
Sterling, VA 20166

BUREAU OF RECLAMATION
WEST-230 COLLINS RD
BOISE, ID 83702

BURLINGTON RESOURCES OIL & GAS
717 Texas Avenue
Houston, TX 77002

BURLINGTON RESOURCES OIL & GAS COMPANY L
C/O CORPORATION SERVICE COMPANY
320 SOMERULOS ST.
BATON ROUGE, LA 70802

BURNS WALL SMITH & MUELLER PC
303 East 17th Avenue
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Denver, CO 80203

Byron E. Crutcher
c/o Carver, Darden, Koretzky, Tessier,
Finn, Blossman, & Areaux, LLC
1100 Poydras Street, Suite 3100
New Orleans, LA 70163

C & H PROPERTIES LLC
PO BOX 1202
MOUNTIAN HOME, ID 83647

C & J WELL SERVICES
PO BOX 975682
DALLAS, TX 75397-5682

C F Henry Properties LLC
c/o Veron Bice Palermo & Wilson LLC
P O Box 2125
Lake Charles, LA 70602-2125

C H FENSTERMAKER & ASSOC LLC
ATTN ACCOUNTS RECEIVABLE
PO BOX 52106
LDYWRRW, LA 70505

C.F. HENRY PROPERTIES
C/O LAW OFFICES OF ASHLEY E. PHILEN
PO BOX 11652
NEW IBERIA, LA 70562

CABOT OIL & GAS CORPORATION CODY ENERGY,
400 Poydras St.
Ste. 1812
New Orleans, LA 70130

Calhoun County Tax Assessor / Collector
211 S Ann St
Port Lavaca, TX 77979

CALIX OIL COMPANY
1035 N. McDowell Boulevard
Petaluma, CA 94954

Callon Offshore Production Inc
c/o Richard Stuart Pabst
Kean Miller LLP, First Bank & Trust Towe
909 Poydras Street Suite 3600
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CAMERON PARISH TAX COLLECTOR
PO BOX 1250
CAMERON, LA 70631

Camex Operating Co
c/o Ottinger Hebert
P O Drawer 52606
Lafayette, LA 70505-2606

CAMEX, INC.
PO BOX 51733
LAFAYETTE, LA 70505

CANADIANOXY OFFSHORE PRODUCTION COMPANY
12790 Merit Drive
Suite 800
Dallas, TX 75251

CanadianOxy Offshore Production, Inc.
c/o CanadianOxy Offshore Production Co.
12790 Merit Drive, Ste. 800
Dallas, TX 75251

CANAL DIESEL SERVICES INC
2716 SOUTHWEST DR
NEW IBERIA, LA 70560

CANDACE JEAN ATKINS
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FRUITLAND, ID 83619

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1115 Albany St
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PAYETTE, ID 83661

CARL H GUTSHALL JR &
4375 BLAINE RD
NEW PLYMOUTH, ID 83655

CARL HENDERSON
8399 WASHOE RD
FRUITLAND, ID 83619

CARLENE M CAMPO
2804 SPRUCE DR
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EMMETT, ID 83617

CARREN M POFF
2693 BAYBERRY DR
FRUITLAND, ID 83619

CARRIE L GRANT
2683 BAYBERRY DR
FRUITLAND, ID 83619

CARUTHERS PRODUCING CO., INC
901 Lakeshore Drive
Suite 900
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CASCADE FENCE COMPANY INC
151 N LINDER RD
MERIDIAN, ID 83642

CASIMIRO PALOMO JR
1006 JONATHAN ST
FRUITLAND, ID 83619

Cassia County Assessor
203 E 15th St
Burley, ID 83318

Castex Energy Inc
c/o James Michael Fussell , Jr
Ottinger Hebert
P O Drawer 52606
Lafayette, LA 70505-2606

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Houma, LA 70364

CENTRAL BOAT RENTALS INC
PO BOX 120422
DEPT 0422
DALLAS, TX 75312-0422

CENTRAL MICHIGAN CEMENTING
SERVICES LLC
1934 COMMERCIAL DRIVE
MT PLEASANT, MI 48858

Century Exploration New Orleans Inc
c/o James Michael Fussell , Jr
Ottinger Hebert
P O Drawer 52606
Lafayette, LA 70505-2606

CHAD GERALD TILLET &
2614 WINESAP AVE
FRUITLAND, ID 83619

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405 S Main St
Anahuac, TX 77514

CHAPPY ENERGY, LLC
31 Hammock Dunes Place
Spring, TX 77389

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6400 WHITLEY DRIVE
FRUITLAND, ID 83619

CHARLENE K QUADE
4802 E ARROW JUNCTION DR
BOISE, ID 83716

CHARLES A HUFF &
7256 CUSTER ROAD
FRUITLAND, ID 83619

CHARLES BAINES &
2130 NE 16TH ST
FRUITLAND, ID 83619

CHARLES COFFMAN &
16721 SE WEBSTER RD
MILWAUKIE, OR 97267

CHARLES E ANDERSON JR &
6390 ADAMS ROAD
NEW PLYMOUTH, ID 83655

CHARLES E MCBEE
1204 TARA CT
FRUITLAND, ID 83619

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PO BOX 159
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309 NW 9TH ST
FRUITLAND, ID 83619

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C/O TALBOT, CARMOUCHE, & MARCELLO
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1303 TARA CT.
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CHARLES R WINEGAR &
5350 SOUTH WHITLEY DRIVE
FRUITLAND, ID 83619

CHARLES W OTTE JR &
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9720 CYPRESSWOOD DR SUITE 218
HOUSTON, TX 77070

CHASE & PAPER CO PC
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IRVING, TX 75016

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1331 POPLAR AVENUE
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CHERYL A SMITH FAMILY TRUST
2605 ROME AVE
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CHESAPEAKE APPALACHIA LLC
900 Pennsylvania Avenue
Charleston, WV 25302

CHESAPEAKE OPERATING INC
PO BOX 650841
DALLAS, TX 75265-0841

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7188 ELMORE RD
FRUITLAND, ID 83619

CHEVRON U.S.A. INC.
400 Convention Street
Suite 700
Baton Rouge, LA 70821

CHEVRON USA
6001 Bollinger Canyon Road
San Ramon, CA 94583

Chevron USA Inc. successor in interest
The Prentice-Hall Corporation System, In
501 Lousiana Ave
Baton Rouge, LA 70802

Chevron USA Holdings, Inc.
c/o Louis Victor Gregoire , Jr.
Kean Miller, II City Plaza
400 Convention St., Suite 700
Baton Rouge, LA 70802

CHEVRON USA, INC.
C/O CORPORATION SERVICE COMPANY
320 SOMERULOS ST.
BATON ROUGE, LA 70802

CHOICE FURNITURE SOURCE LLC
10515 HARWIN DR # 150
SUITE 200
HOUSTON, TX 77036

CHRISTOPHER AITKENS
C/O TALBOT, CARMOUCHE, & MARCELLO
17405 PERKINS ROAD
BATON ROUGE, LA 70810

CHRISTOPHER GORDON PRESTON &
2601 WINESAP AVENUE
FRUITLAND, ID 83619

CHRISTOPHER HAMPTON
1583 PONDEROSA
FRUITLAND, ID 83619

CHRISTOPHER J LOWRY &
8360 DUTCH LANE
PAYETTE, ID 83661

CHRISTOPHER L MIO &
7235 BOISE ROAD
FRUITLAND, ID 83619

CHRISTOPHER LEE HOLLAWAY &
2698 BAYBERRY DRIVE
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2603 APPLEWOOD AVE
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101 VENTURE WAY
LAFAYETTE, LA 70507

CIT TECHNOLOGY FIN SERV INC
21146 NETWORK PLACE
CHICAGO, IL 60673-1211

CITY OF ST GABRIEL
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ST GABRIEL, LA 70776

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CLARK ROLAND &
8750 YEAGER LANE
PAYETTE, ID 83661

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SALEM, OR 97305

CLINTON D ROHRBACHER
4000 BROOKLYN LANE
EMMETT, ID 83617

CLINTON MARSHALL &
2130 E 1ST ST
FRUITLAND, ID 83619

CLYNN E. NUTT
8307 WASHOE ROAD
FRUITLAND, ID 83619

CMP Family LLC
c/o A. Shelby Easterly, III
142 Del Norte Avenue
Denham Springs, LA 70726

COASTAL FLOW GAS MEASUREMENT
PO BOX 58965
HOUSTON, TX 77258-8965

COCKRELL OIL CORPORATION
1000 MAIN STREET
HOUSTON, TX 77002

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CODY D STEPHENS
907 GOLDEN AVE
FRUITLAND, ID 83619

CODY L GARDNER
2144 LOCUST WAY
FRUITLAND, ID 83619

Columbia Gulf Transmission L L C
c/o James Michael Fussell , Jr
Ottinger Hebert
P O Drawer 52606
Lafayette, LA 70505-2606

COMPROMISE AGEEMENT
n/a
n/a, n/a n/a

COMPROMISE AGREEMENT FOR STATE LEASE 340
n/a
n/a, n/a n/a

Condor Petroleum Corp
c/o Jamie D Rhymes
Liskow & Lewis
P O Box 52008 O C S
Lafayette, LA 70505

CONIG 818 INVESTMENTS LLC
2929 Allen Parkway # 4100
Houston,, TX 77019

Conley P Smith L L C
c/o Jason Edward Wilson
Galloway Johnson et al
328 Settlers Trace Blvd
Lafayette, LA 70508

Conley P Smith Operating Co
c/o Jason Edward Wilson
Galloway Johnson et al
328 Settlers Trace Blvd
Lafayette, LA 70508

Connick & Connick, LLC
3421 N. Causeway Blvd.
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Metairie, LA 70002

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501 Louisiana Avenue
Baton Rouge, LA 70802

ConocoPhillips Company
c/o Deborah D Kuchle
Kuchler Polk Weiner, LLC
1615 Poydras St. Suite 1300
New Orleans, LA 70112

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2056 SPRING CREEK DRIVE
FRUITLAND, ID 83619

COOKIE ATKINS
8036 ESTATES BLVD
FRUITLAND, ID 83619

CORI L SMITH
2746 SPRUCE DR
FRUITLAND, ID 83619

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Baker Donelson Bearman Caldwell & Berkow
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7288 HILLVIEW ROAD
EMMETT, ID 83617

CREAMER DOZER SERVICE INC
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BREWTON, AL 36426

CROFT PRODUCTION SYSTEMS INC
19230 FM 442 ROAD
NEEDVILLE, TX 77461

Croft Production Systems, Inc (CROFT)
19230 FM 442 Needville
Needville, TX 77461

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1510 NW 26TH ST
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PHILADELPHIA, PA 19101-3397

CTM 2005, LTD
3312 Bammel Lane
Houston, TX 77098

CTMI LLC
12221 MERIT
SUITE 1200
DALLAS, TX 75251

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94235 W Moore St #221
Gold Beach, OR 97444

CURT D STOWE &
1009 BRAEBURN ST
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CURT KAMO AND KATHLEEN M KAMO
3463 SW 2ND AVENUE
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CYPRESS FIRE & SAFETY LLC
10725 SIDNEY GAUTREAUX RD
ABBEVILLE, LA 70510

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PO BOX 579
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D MARC HAWS & KAREN I HAWS
893 EAST FOURTH CT
KUNA, ID 83634

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1128 BARROW STREET
HOUMA, LA 70360

DALE & MARY ANN MARTIN TRUST
227 EVERGREEN RD
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DALE GENE MILLER
2929 NW 4TH AVENUE
FRUITLAND, ID 83619

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PO BOX 63
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DALE SWANSON &
3495 BEACON AVENUE
EMMETT, ID 83617

DAMEON EPPERSON
6519 SE CENTER ST
PORTLAND, OR 97206

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3285 WEST HIGHWAY 52
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DANIEL DUANE FERRY
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PORTLAND, OR 97217

DANIEL G DOERSCH &
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DANIEL L GREEN
PO BOX 730
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DANIEL R VANDERPOOL &
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DANIEL WEAVER
9553 W HIGHWAY 52
EMMETT, ID 83617

DANNY A LITTLE &
1401 JESSICA AVENUE
FRUITLAND, ID 83619

DANNY L SQUIBB
102 NE 14TH DRIVE
FRUITLAND, ID 83619

DANNY P ERSKINE
7699 ELMORE RD
FRUITLAND, ID 83619

DANNY R CLARICH
1590 POPLAR AVE
FRUITLAND, ID 83619

DANNY SMITH &
8305 WASHOE RD
FRUITLAND, ID 83619

DANOS LLC
3878 WEST MAIN STREET
GRAY, LA 70359

DARIN L SIPES &
8520 RABY LANE
PAYETTE, ID 83661

DARLEEN M WALKER
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FRUITLAND, ID 83619

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DARLENE M RAMBO
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1301 JESSICA AVE
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5770 CUSTER ROAD
NEW PLYMOUTH, ID 83655

DASHANNA M CURETON
815 NORTH WEST 3RD STREET
FRUITLAND, ID 83619

DAVE A FELTY SR &
8271 WASHOE ROAD
PAYETTE, ID 83619

DAVID C DERRICK &
2615 APPLEWOOD AVE
FRUITLAND, ID 83619

DAVID C RONK &
3440 H ST
EUREKA, CA 95503-5361

DAVID D GOSS &
1937 TABLE ROCK RD
BOISE, ID 83712

DAVID E CARPENTER &
2254 E 1ST ST
FRUITLAND, ID 83619

DAVID E JENNINGS &
2274 NE 16TH ST
FRUITLAND, ID 83619

DAVID E KOEPPEN SURVIVORS TRST
1583 NW 26TH STREET
FRUITLAND, ID 83619

DAVID G BIEKER &
7400 CUSTER ROAD
FRUITLAND, ID 83619

DAVID G LIRGG &
7860 RICHEY ROAD
FRUITLAND, ID 83619

DAVID G LOCKNER
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Confidential
Confidential

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DAVID K HAIDLE &
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1295 W 7TH ST APT 14
WEISER, ID 83672

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DENNIS EVANS &
15178 GALLOWAY ROAD
CALDWELL, ID 83607

DENNIS J HERWY &
3700 3RD LANE EAST
PARMA, ID 83660

DENNIS K UJIIYE &
1505 NW 2ND AVENUE
FRUITLAND, ID 83619

DENNIS L PRUETT &
27262 USTICK ROAD
WILDER, ID 83676

DENNIS NEWMAN &
8043 N PENNSYLVANIA AVE
FRUITLAND, ID 83619

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c/o Jamie D Rhymes
Liskow & Lewis
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DEPARTMENT OF INTERIOR-MMS 15156 EAST CA
LA

Department of Natural Resources
P.O. Box 94396
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DEPARTMENT OF THE INTERIOR OCS-G 4486 MA
LA

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PAYETTE, ID 83661

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2701 N ALDER DR # 0
FRUITLAND, ID 83619

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1990 E BLACK CANYON HIGHWAY
EMMETT, ID 83617

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DOLORES L SOUTHARD
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BOISE, ID 83702

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1015 VICTORIA AVE
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DON GROSS
2206 NORTH WHITLEY DRIVE
FRUITLAND, ID 83619

DONALD A HAAGENSEN &
804 NW 24TH ST
SUITE A
FRUITLAND, ID 83619

DONALD C SAVAGE &
1810 N VISTA AVE
FRUITLAND, ID 83619

DONALD G PREUSS &
3911 KINGSTON AVENUE
CALDWELL, ID 83605

DONALD L. DRESSEN
2742 NW 4TH AVENUE
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DONALD M BAINES AND
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DONALD NELSON &
141 BEECH STREET
FRUITLAND, ID 83619

DONALD PAYNE &
9818 SOUTHBANK RD
ROSEBURG, OR 97470

DONALD REED & JANET REED
1882 W CREEK CT
NAMPA, ID 83686

DONALD S MORRISON &
2605 ALDER DR
FRUITLAND, ID 83619

DONNA BATT
7763 ELMORE ROAD
FRUITLAND, ID 83619

DONNA L BURZOTA TRUST
2600 APPLEWOOD AVE
FRUITLAND, ID 83619

DONNA MAE HUME
910 JONATHAN ST
FRUITLAND, ID 83619

DONNA MCKINLEY
C/O TALBOT, CARMOUCHE, & MARCELLO
17405 PERKINS ROAD
BATON ROUGE, LA 70810

DONNETTE ANN REINS
9615 SUGAR HILL #B
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DONOHIO INC
1033 ALAMEDA DR
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DORA J LEICHSENRING
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DORIS MASHBURN
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DOUGLAS A. WHITE &
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DOUGLAS D MOSCRIP &
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4916 N PIERCE PARK LN
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DOUGLAS E SCARLETT &
7300 DENVER
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DOUGLAS G DEARDORFF &
310 N UTAH AVE
FRUITLAND, ID 83619

DOUGLAS M KIMBALL &
2169 ALPINE CREEK DRIVE
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DOUGLAS S OLSON &
8820 SOLTERBECK LN
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DUANE E BRIGHTWELL &
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DUANE L COFFEY SR
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DUSTIN MCDANIEL &
4797 NW 1ST AVE
NEW PLYMOUTH, ID 83655

DWAINE ANTHONY TESNOHLIDEK &
4505 SOUTH WHITLEY DRIVE
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EAGLE ISLAND RANCH INC
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EMMETT, ID 83617

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EARLENE ANNETTE WALSTON
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FRUITLAND, ID 83619

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Sugarland, TX 77478

EDUARDO FERRERIA &
2900 SW 3RD AVENUE
NEW PLYMOUTH, ID 83655

ELDRED FARMS INC &DARYL ELDRED
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ELTON J HUNSUCKER &
1904 HEITZ AVE
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ELVIN DEWITT LIVING TRUST
5025 HILLVIEW ROAD
EMMETT, ID 83617

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EMMETT C ROSENKRANCE &
2152 MAPLE CT
FRUITLAND, ID 83619

EMMETT L MAINE &
3760 HIGHWAY 95
PARMA, ID 83660

Enable Oklahoma Intrastate Transmission
c/o Thomas D Gildersleeve
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Energen Resources Corporation
c/o Joe B Norman
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701 Poydras St. Suite 5000
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PO BOX 309
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ENERGY TUBULARS INC
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ESSENJAY EXPLORATION INC
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EVANS FAMILY TRUST
26281 FREEZEOUT ROAD
CALDWELL, ID 83607

EVERET L HIATT &
3394 ARCADIA BLVD
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EVERGREEN WORKING CAPITAL LLC
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Liskow & Lewis
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New Orleans, LA 70139

Exxon Mobil Corp
c/o Robert B McNeal
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PAYETTE, ID 83661-2522

FEDERICO MEDINA &
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FELIPE LOPEZ &
2809 NW 4TH AVE
FRUITLAND, ID 83619

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c/o Douglas C Longman , Jr
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Florida Department of Revenue
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FRANK J CUNNINGHAM &
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FRANK JAMES
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FRAZER C PETERSON AND
LAWS OF ST OF IDAHO DTD
12/17/2014
2075 KILLEBREW DRIVE
FRUITLAND, ID 83619

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7845 ELMORE ROAD
FRUITLAND, ID 83619

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G&G SURVEY AND CONSULTING INC
1418 EMMOTT DR
RICHMOND, TX 77469

GAIL DELBRIDGE &
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FRUITLAND, ID 83619

GAIL L DAVIS
506 WEST 2ND NORTH
MOUNTAIN HOME, ID 83647

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16600 Park Row
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GALVESTON COUNTY TAX ASSESSOR
722 MOODY
GALVESTON, TX 77550

GARMAN & SONS INC
8523 WASHOE ROAD
PAYETTE, ID 83661

GARRED AUTOMOTIVE LLC
PO BOX 446
NEW PLYMOUTH, ID 83655

GARRETT R DAUDT &
8513 HWY 95
PAYETTE, ID 83661

GARRY C. SEAWARD &
3595 NW 4TH AVE
NEW PLYMOUTH, ID 83655

GARY A SMITH TRUST
2017 THORNBURY COURT
RENO, NV 89523

GARY C WILLIAMSON &
2288 NE 16TH ST
FRUITLAND, ID 83619

GARY D OWEN
1488 POPLAR AVE
FRUITLAND, ID 83619

GARY E BOURQUIN &
8800 MICKELSON LANE
PAYETTE, ID 83661

GARY F BROWN &
8210 N PENNSYLVANIA AVE
FRUITLAND, ID 83619

GARY GARDNER
1010 JONATHAN ST
FRUITLAND, ID 83619

GARY HALE &
2857 NW 4TH AVE
FRUITLAND, ID 83619

GARY K FLOYD &
297 ASH LOOP
FRUITLAND, ID 83619

GARY L DUFF &
2375 KILLEBREW DRIVE
PAYETTE, ID 83661

GARY L WALLACE &
1808 ALLEN AVENUE
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Gary Production Company
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2735 SPRUCE DR
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GEORGE W BACUS
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GERALD F ACKERMAN
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GERALD FRED BENNETT
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GERALD W MITCHELL &
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35068 PITTSBURG ROAD
ST HELENS, OR 97051

GILBERT I WELLS &
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PARMA, ID 83660

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#425
THE WOODLANDS, TX 77380

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ESCONDIDO, CA 92026

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GLEND A D GRACE &
1755 KILLEBREW DRIVE
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GLEND A EUBANKS &
848 W LOCUST LANE
NAMP A, ID 83686

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GULF/INLAND CONTRACTORS INC
C/O SOUTH LOUISIANA BANK
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2472 W FORECAST ST
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HELMS
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Confidential

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**United States Bankruptcy Court
Southern District of Texas**

In re **High Mesa, Inc.**

Debtor(s)

Case No.

Chapter

7

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **High Mesa, Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

AM MME Holdings, LP
15021 Katy Freeway, Suite 400
Houston, TX 77094

BCE-MESA HOLDINGS LLC
1201 Louisiana Street
Suite 3308
Houston, TX 77002

Mezzanine Partners II Delaware Sub., LLC
HPS Investment Partners, LLC
40 West 57th Street 33rd Floor
New York, NY 10019

Offshore Mezzanine Partners Master Fund
HPS Investment Partners, LLC
40 West 57th Street 33rd Floor
New York, NY 10019

☐ None [Check if applicable]

January 24, 2020

Date

/s/ RANDY W. WILLIAMS

RANDY W. WILLIAMS

Signature of Attorney or Litigant

Counsel for **High Mesa, Inc.**

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